Landscape of Plan
Options in
Illinois
2007



# Medicare Advantage Cost Plans and Demonstrations

1-800-MEDICARE TTY 1-877-486-2048 www.medicare.gov



maicatec plan de	es not offer Part D drug coverage.								011
				Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Adams	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Adams	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Adams	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Adams	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Adams	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Adams	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Adams	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Adams	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Adams	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Adams	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Adams	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Adams	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Adams	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Adams	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Adams	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Adams	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Adams	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Adams	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Adams	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Adams	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					1
Alexander	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		
Alexander	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	ψ0.00	ψö	21111011000		<del>                                     </del>
Alexander	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		
Alexander	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Alexander	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	Ψ200	Ψű	240.0		
Alexander	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Alexander	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00	Ψ20.70	Ψ100	Limaneca		<del></del>
Alexander	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					<del>                                       </del>
Alexander	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		
Alexander	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Alexander	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	\$44.90	ΦΟ	Lilianceu	Genencs	<del></del>
Alexander	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					<del>                                     </del>
Alexander	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		<del>                                     </del>
Alexander		SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	\$11.00	ΦU	Ennanced		•
	Unicare Life & Health Ins. Company	, , , , , , , , , , , , , , , , , , , ,	PFFS		<b>#00.70</b>	<b>C</b> O	Enhanced	Generics	<b></b>
Alexander	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)		\$56.00	\$28.70	\$0	Enhanced	Generics	•
Bond	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00	<b>#</b> 0.00	<b>C</b> O	Enhanced		<u> </u>
Bond	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Bond	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	<b>#</b> 00.00				<u> </u>
Bond	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Bond	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Bond	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					<b></b>
Bond	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					<u> </u>
Bond	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Bond	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					<b>↓</b>
Bond	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					<b></b>
Bond	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Bond	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Bond	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Boone	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Boone	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Boone	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Boone	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					1

indicates plan do	oes not offer Part D drug coverage.			Manual I.					055
				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
		<u></u>	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Boone	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Boone	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Boone	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Boone	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Boone	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
Boone	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
Boone	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Boone	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Boone	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Boone	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Boone	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Boone	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Boone	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00	Ψ20.7 0	ψ.σσ	21111011000		_
Boone	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00					
Boone	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic		•
Boone	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	•
Boone	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	Ψ-1.50	ΨΟ	Lilianoca	Generics	-
Boone	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Boone			PFFS *	\$11.00	\$11.00	\$0	Ennanced		•
Boone	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	
Boone	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)						Generics	•
Boone	WellCare	Concert (H4577-012)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Boone	WellCare	Summit (H4577-007)	PFFS	\$140.90	\$14.40	\$0	Enhanced		•
Brown	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Brown	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Brown	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Brown	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Brown	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Brown	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Brown	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Brown	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Brown	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	ψο.σσ	Ţ.	21111011000		_
Brown	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Brown	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Brown	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00	Ψ20.10	Ψΰ	Baoio		
Brown	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Brown	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
Brown	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
Brown	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40				Dianus	
Brown	Sierra Optima	Sierra Optima (H4449-003)	PFFS *	\$149.20					
Brown	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Brown	Today's Option	Today's Options Value (H5421-035)	PFFS*	\$12.00	ψ20.70	ψ100	Limanced	<del> </del>	•
	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00		<del>                                     </del>			
Brown		Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042)	PFFS	\$35.00 \$44.00	\$31.90	\$0	Basic	<del> </del>	
Brown	Today's Option	, , , , , , , , , , , , , , , , , , , ,						Conorios	•
Brown	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Brown	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	1	<b>!</b>	<b> </b>	1	
Brown	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00	l				

	es not offer Part D drug coverage.			Manadala					066
				Monthly					Offers
				Consolidated	Manuallala	0	Down	T 6	Variable
			T (14 !!	Premium	Monthly	Annual	Drug	Type of	Drug
		SI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Brown	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Brown	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	<b>#</b> 00 <b>7</b> 0			Camadaa	
Brown	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Bureau	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Bureau	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00	<b>#</b> 00.00		- ·		
Bureau	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic	Commission	•
Bureau	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Bureau	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Bureau	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Bureau	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Bureau	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Bureau	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Bureau	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Bureau	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Bureau	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Bureau	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Bureau	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
Bureau	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
Bureau	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Bureau	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Bureau	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Bureau	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Bureau	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Bureau	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Bureau	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Bureau	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Bureau	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Bureau	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Bureau	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Bureau	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Calhoun	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Calhoun	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Calhoun	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Calhoun	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Calhoun	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Calhoun	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Calhoun	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Calhoun	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Calhoun	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Calhoun	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Calhoun	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Calhoun	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Calhoun	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Calhoun	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Calhoun	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	Ţ <del>.</del>				
	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00		<del>                                     </del>			

County Carroll	Organization Name Humana Insurance Company SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	Plan Name Humana Gold Choice PFFS H1804-137 (H1804-137) HumanaChoicePPO PPO R5826-023 (R5826-023) Humana Gold Choice PFFS H1804-199 (H1804-199) HumanaChoicePPO PPO R5826-009 (R5826-009) SecureHorizons MedicareDirect Plan 10 (H5435-010) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Value (H5421-037) Today's Options Premier (H5421-042) Today's Options Premier Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Essential (H4456-016)	Type of Medicare Health Plan PFFS Regional PPO* PFFS * PFF	Monthly Consolidated Premium (Includes Part C + D) \$0.00 \$0.00 \$20.00 \$71.00 \$0.00 \$81.40 \$149.20 \$28.70 \$12.00 \$35.00 \$444.00 \$80.00 \$11.00 \$50.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Monthly Drug Premium \$0.00 \$20.00 \$26.10 \$28.70 \$31.90 \$44.90 \$11.00	Annual Drug Deductible \$0 \$0 \$0 \$100 \$0 \$0 \$0	Drug Benefit Type Enhanced Enhanced Basic Enhanced  Basic Enhanced  Enhanced	Type of Extra Coverage Offered in the Gap  Generics	•
Carroll	Humana Insurance Company SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc.	Humana Gold Choice PFFS H1804-137 (H1804-137) HumanaChoicePPO PPO R5826-023 (R5826-023) Humana Gold Choice PFFS H1804-199 (H1804-199) HumanaChoicePPO PPO R5826-009 (R5826-009) SecureHorizons MedicareDirect Plan 10 (H5435-010) Sierra Optima (H4449-006) Sierra Optima (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-010) SecurityChoice Enhanced (H0540-010) MedicareComplete Plan 1 (H4456-010)	Health Plan PFFS Regional PPO * PFFS Regional PPO PFFS * P	Premium (Includes Part C + D) \$0.00 \$0.00 \$20.00 \$81.40 \$149.20 \$28.70 \$35.00 \$44.00 \$80.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$56.00 \$56.00	\$28.70  \$11.00  \$28.70	\$0 \$0 \$100 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	Benefit Type Enhanced Enhanced Basic  Enhanced  Basic  Enhanced  Basic	Extra Coverage Offered in the Gap	Drug Co-payments  •  •  •  •  •  •  •
Carroll	Humana Insurance Company SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc.	Humana Gold Choice PFFS H1804-137 (H1804-137) HumanaChoicePPO PPO R5826-023 (R5826-023) Humana Gold Choice PFFS H1804-199 (H1804-199) HumanaChoicePPO PPO R5826-009 (R5826-009) SecureHorizons MedicareDirect Plan 10 (H5435-010) Sierra Optima (H4449-006) Sierra Optima (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-010) SecurityChoice Enhanced (H0540-010) MedicareComplete Plan 1 (H4456-010)	Health Plan PFFS Regional PPO * PFFS Regional PPO PFFS * P	(Includes Part C + D) \$0.00 \$0.00 \$20.00 \$71.00 \$0.00 \$81.40 \$149.20 \$28.70 \$12.00 \$35.00 \$44.00 \$80.00 \$11.00 \$25.00	\$28.70  \$11.00  \$28.70	\$0 \$0 \$100 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	Benefit Type Enhanced Enhanced Basic  Enhanced  Basic  Enhanced  Basic	Extra Coverage Offered in the Gap	Co- payments  •  •  •  •  •  •  •  •  •  •  •  •  •
Carroll	Humana Insurance Company SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc.	Humana Gold Choice PFFS H1804-137 (H1804-137) HumanaChoicePPO PPO R5826-023 (R5826-023) Humana Gold Choice PFFS H1804-199 (H1804-199) HumanaChoicePPO PPO R5826-009 (R5826-009) SecureHorizons MedicareDirect Plan 10 (H5435-010) Sierra Optima (H4449-006) Sierra Optima (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-010) SecurityChoice Enhanced (H0540-010) MedicareComplete Plan 1 (H4456-010)	Health Plan PFFS Regional PPO * PFFS Regional PPO PFFS * P	Part C + D) \$0.00 \$0.00 \$20.00 \$20.00 \$71.00 \$0.00 \$81.40 \$149.20 \$28.70 \$12.00 \$35.00 \$44.00 \$80.00 \$11.00 \$25.00 \$56.00	\$28.70 \$11.00 \$28.70	\$0 \$0 \$0 \$0 \$0 \$100 \$100	Enhanced Basic Enhanced Basic Enhanced Enhanced	Offered in the Gap	payments
Carroll	Humana Insurance Company SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc.	Humana Gold Choice PFFS H1804-137 (H1804-137) HumanaChoicePPO PPO R5826-023 (R5826-023) Humana Gold Choice PFFS H1804-199 (H1804-199) HumanaChoicePPO PPO R5826-009 (R5826-009) SecureHorizons MedicareDirect Plan 10 (H5435-010) Sierra Optima (H4449-006) Sierra Optima (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-010) SecurityChoice Enhanced (H0540-010) MedicareComplete Plan 1 (H4456-010)	PFFS Regional PPO * PFFS * Regional PPO PFFS *	\$0.00 \$0.00 \$20.00 \$71.00 \$0.00 \$81.40 \$149.20 \$28.70 \$12.00 \$35.00 \$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$20.00 \$20.00 \$26.10 \$28.70 \$31.90 \$44.90 \$11.00	\$0 \$0 \$0 \$100 \$0 \$0 \$0 \$0 \$0	Enhanced  Enhanced  Basic  Enhanced  Basic  Enhanced		•
Carroll	Humana Insurance Company Humana Insurance Company Humana Insurance Company SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc.	HumanaChoicePPO PPO R5826-023 (R5826-023) Humana Gold Choice PFFS H1804-199 (H1804-199) HumanaChoicePPO PPO R5826-009 (R5826-009) SecureHorizons MedicareDirect Plan 10 (H5435-010) Sierra Optima (H4449-006) Sierra Optima (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	Regional PPO * PFFS Regional PPO PFFS * PFFS * PFFS * PFFS * PFFS PFFS PFFS PFFS PFFS PFFS MSA * PFFS *	\$0.00 \$20.00 \$71.00 \$0.00 \$81.40 \$149.20 \$28.70 \$12.00 \$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$20.00 \$26.10 \$28.70 \$31.90 \$44.90 \$11.00	\$0 \$0 \$100 \$100 \$0 \$0 \$0	Enhanced Basic  Enhanced  Basic  Enhanced	Generics	•
Carroll	Humana Insurance Company Humana Insurance Company SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc.	Humana Gold Choice PFFS H1804-199 (H1804-199) HumanaChoicePPO PPO R5826-009 (R5826-009) SecureHorizons MedicareDirect Plan 10 (H5435-010) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS Regional PPO PFFS *	\$20.00 \$71.00 \$0.00 \$81.40 \$149.20 \$28.70 \$12.00 \$35.00 \$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$26.10 \$28.70 \$31.90 \$44.90 \$11.00	\$0 \$100 \$0 \$0 \$0	Basic  Enhanced  Basic  Enhanced	Generics	•
Carroll	Humana Insurance Company SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option Unicare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc.	HumanaChoicePPO PPO R5826-009 (R5826-009) SecureHorizons MedicareDirect Plan 10 (H5435-010) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Premier (H5421-042) Today's Options Premier Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-010) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	Regional PPO PFFS *	\$71.00 \$0.00 \$81.40 \$149.20 \$28.70 \$12.00 \$35.00 \$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$26.10 \$28.70 \$31.90 \$44.90 \$11.00	\$0 \$100 \$0 \$0 \$0	Basic  Enhanced  Basic  Enhanced	Generics	•
Carroll	SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc.	SecureHorizons MedicareDirect Plan 10 (H5435-010) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS * PF	\$0.00 \$81.40 \$149.20 \$28.70 \$12.00 \$35.00 \$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$28.70 \$31.90 \$44.90 \$11.00	\$100 \$0 \$0 \$0	Enhanced  Basic Enhanced	Generics	•
Carroll	Sierra Optima Sierra Optima Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc.	Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Premier (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS *	\$81.40 \$149.20 \$28.70 \$12.00 \$35.00 \$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$31.90 \$44.90 \$11.00 \$28.70	\$0 \$0 \$0	Basic Enhanced	Generics	•
Carroll	Sierra Optima Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	Sierra Optima Plus (H4449-003) Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS * PFFS + PF	\$149.20 \$28.70 \$12.00 \$35.00 \$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$31.90 \$44.90 \$11.00 \$28.70	\$0 \$0 \$0	Basic Enhanced	Generics	•
Carroll	Sterling Life Insurance Company Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	Sterling Option II (H5006-010) Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS PFFS * PFFS PFFS PFFS MSA * PFFS * PFFS * PFFS PFFS Local HMO	\$28.70 \$12.00 \$35.00 \$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$31.90 \$44.90 \$11.00 \$28.70	\$0 \$0 \$0	Basic Enhanced	Generics	•
Carroll	Today's Option Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	Today's Options Value (H5421-035) Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS * PFFS PFFS MSA * PFFS * PFFS * PFFS * PFFS * PFFS * PFFS Local HMO	\$12.00 \$35.00 \$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$31.90 \$44.90 \$11.00 \$28.70	\$0 \$0 \$0	Basic Enhanced	Generics	•
Carroll	Today's Option Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	Today's Options Premier (H5421-037) Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS * PFFS PFFS MSA * PFFS * PFFS PFFS PFFS Local HMO	\$35.00 \$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$44.90 \$11.00 \$28.70	\$0 \$0	Enhanced	Generics	•
Carroll Cass	Today's Option Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	Today's Options Value Plus (H5421-042) Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS PFFS MSA* PFFS* PFFS PFFS PFFS Local HMO	\$44.00 \$80.00 \$0.00 \$11.00 \$25.00 \$56.00	\$44.90 \$11.00 \$28.70	\$0 \$0	Enhanced	Generics	•
Carroll Cass	Today's Option UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS MSA * PFFS * PFFS * PFFS * PFFS * PFFS *	\$80.00 \$0.00 \$0.00 \$11.00 \$25.00 \$56.00	\$44.90 \$11.00 \$28.70	\$0 \$0	Enhanced	Generics	•
Carroll	UniCare Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	Save Well - Plan II (H7289-002) SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	MSA * PFFS * PFFS PFFS * PFFS Local HMO	\$0.00 \$0.00 \$11.00 \$25.00 \$56.00	\$11.00 \$28.70	\$0		Generics	
Carroll Cass Cass Cass Cass	Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS * PFFS * PFFS * PFFS Local HMO	\$0.00 \$11.00 \$25.00 \$56.00	\$28.70		Enhanced		
Carroll Carroll Carroll Carroll Carroll Carroll Carroll Carroll Cass Cass Cass Cass	Unicare Life & Health Ins. Company Unicare Life & Health Ins. Company Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS * PFFS Local HMO	\$11.00 \$25.00 \$56.00	\$28.70		Enhanced		
Carroll Carroll Carroll Carroll Carroll Carroll Carroll Cass Cass Cass Cass	Unicare Life & Health Ins. Company Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032) MedicareComplete Plan 1 (H4456-010)	PFFS * PFFS Local HMO	\$25.00 \$56.00	\$28.70		Enhanced		
Carroll Carroll Carroll Carroll Carroll Carroll Carroll Cass Cass Cass Cass	Unicare Life & Health Ins. Company Unicare Life & Health Ins. Company UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	SecurityChoice Enhanced Plus (H0540-032)  MedicareComplete Plan 1 (H4456-010)	PFFS Local HMO	\$56.00		60		_	•
Carroll Carroll Carroll Carsoll Cass Cass Cass Cass	UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO			¢Λ	1	İ	
Carroll Carroll Cass Cass Cass Cass	UnitedHealthcare Plan of the River Valley, Inc. UnitedHealthcare Plan of the River Valley, Inc.	, , ,		\$0.00	4	\$0	Enhanced	Generics	•
Carroll  Cass Cass Cass Cass		MedicareComplete Essential (H4456-016)		1	\$0.00	\$0	Enhanced		•
Carroll  Cass  Cass  Cass  Cass	UnitedHealthcare Plan of the River Valley, Inc.		Local HMO *	\$56.00					
Carroll Cass Cass Cass Cass	Officer realificate Flatt of the Titler valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		
Cass Cass Cass Cass		,		,		**			
Cass Cass Cass	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Cass Cass	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Cass	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Cass	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Cass	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Cass	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Cass	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Cass	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		
Cass	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	*	•			
Cass	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Cass	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Cass	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00	Ψ20.10	Ψΰ	Baoio		
Cass	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Cass	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
Cass	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	•
Cass	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00				Brands	<del>                                     </del>
Cass	Sierra Optima	Sierra Optima (H4449-006)	PFFS*	\$81.40		1	1	1	
Cass	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20		1	1	1	
Cass	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Cass	Today's Option	Today's Options Value (H5421-035)	PFFS*	\$12.00	Ψ20.70	Ψίου	Linanced		<del></del>
Cass	Today's Option	Today's Options Premier (H5421-037)	PFFS*	\$35.00		<del>                                     </del>	1	<del> </del>	$\vdash$
Cass	Troday 5 Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic	<del> </del>	
Cass	Today's Ontion	Today's Options Value Plus (H5421-042)  Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Cass	Today's Option Today's Option		MSA *	\$0.00	φ <del>44</del> .90	φυ	Ennanced	OCHEIICS	. •

indicates plan doe	es not offer Part D drug coverage.			Manualists.					066
				Monthly					Offers
				Consolidated	Manualla I	0	Down	T 6	Variable
			T (14 !!	Premium	Monthly	Annual	Drug	Type of	Drug
		DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Cass	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00		-			
Cass	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Cass	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00			L		
Cass	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Champaign	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Champaign	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Champaign	Health Alliance Medical Plans	Health Alliance Medicare HMO30 (H1463-002)	Local HMO *	\$51.00					
Champaign	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Champaign	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx (H1463-004)	Local HMO	\$88.20	\$30.30	\$0	Basic		•
Champaign	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Champaign	Health Alliance Medical Plans	Health Alliance Medicare HMO20 (H1463-001)	Local HMO *	\$91.00					
Champaign	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx Plus (H1463-006)	Local HMO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Champaign	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Champaign	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00	1	1			
Champaign	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx (H1463-003)	Local HMO	\$128.20	\$30.30	\$0	Basic		•
Champaign	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx Plus (H1463-005)	Local HMO	\$137.10	\$39.20	\$0	Enhanced	Generics	
Onampaign		,		•	****	**		001101100	
Champaign	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Champaign	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Champaign	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Champaign	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	•				
Champaign	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Champaign	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
Champaign	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Champaign	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Champaign	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Champaign	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Champaign	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00	Ψ20.70	Ψισσ	Emianoca		
Champaign	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00					<del> </del>
Champaign	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic		
Champaign	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	
Champaign	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	Ψ-1.50	ΨΟ	Limaneca	GCHCHC3	
Champaign	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					-
Champaign	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Champaign	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	ψ11.00	ΨΟ	Lillanceu		
Champaign	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Champaign	WellCare	Duet (H4577-003)	PFFS*	\$0.00	Ψ20.70	ΨΟ	Lilianceu	Generics	<del></del>
Champaign Champaign	WellCare	Concert (H4577-014)	PFFS	\$81.00	\$38.20	\$0	Enhanced	1	<del></del>
	WellCare	Summit (H4577-008)	PFFS	\$161.00	\$38.20	\$0	Enhanced	-	•
Champaign Christian	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$161.00 \$51.00	φ31.3U	φU	Ennanced	<del> </del>	<b>─</b>
Christian Christian	Health Alliance Medical Plans Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO	\$88.20	\$30.30	\$0	Basic	-	•
	Health Alliance Medical Plans		Local PPO	\$97.10	\$39.20	\$0		Conorine	1
Christian	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Christian	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Christian	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Christian	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Christian	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Christian	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Christian	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Christian	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		

indicates plan de	oes not offer Part D drug coverage.								000
				Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Christian	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Christian	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Christian	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Christian	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Christian	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Christian	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Christian	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Clark	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Clark	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Clark	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Clark	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
o la lit	Trouble / filmarros (modrodi ) fallo	Troductive incursaries in Good tox ride (111111 Good)	20000	Ψοιτιο	<b>\$00.20</b>	Ψ0	21111011000	Cononido	_
Clark	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					1
Clark	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (11417-001)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Clark	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Jiai K	riediti Alliance iviedicai Fians	Treatiti Alliance Medicare FFO to RX Flus (111417-005)	LUCAIFFU	\$147.10	φ39.20	ΦΟ	Lilianceu	Generics	•
Clark	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Clark	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	\$0.00	ΦU	Ennanced		<u> </u>
	. ,				<b>#00.00</b>	<b>C</b> O	Estra a sad		<del> </del>
Clark	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Clark	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Clark	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					<u> </u>
Clark	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Clark	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					ļ
Clark	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Clark	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					ļ
Clark	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Clark	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Clark	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Clark	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Clark	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Clark	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Clark	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Clark	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Clay	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	4=00	**			
Clay	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Clay	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Clay	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Clay	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	Ψ24.00	ΨΟ	Lilianoca		<del>                                     </del>
Clay	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Clay	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00	Ψ20.70	\$100	Lilianceu		-
Clay	Today's Option	Today's Options Value (13421-032)  Today's Options Premier (H5421-034)	PFFS *	\$72.00					<del>                                     </del>
	, ,		PFFS	\$80.00	\$31.90	<b>C</b> O	D'-		<b></b>
Clay	Today's Option	Today's Options Value Plus (H5421-040)				\$0	Basic	Conorino	•
Clay	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Clay	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					<b>_</b>
Clay	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Clay	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced	1	•
Clay	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					<b></b>
Clay	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Clinton	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Clinton	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Clinton	Humana Insurance Company	Humana Gold Choice PFFS H1804-138 (H1804-138)	PFFS	\$39.00	\$25.40	\$0	Enhanced		•
Clinton	Humana Insurance Company	Humana Gold Choice PFFS H1804-200 (H1804-200)	PFFS	\$59.00	\$26.40	\$0	Enhanced		•
Clinton	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Clinton	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00			1		

	does not offer Part D drug coverage.			Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Clinton	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40	Tremium	Deductible	Турс	Official III the Gap	payments
Clinton	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Clinton	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Clinton	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Clinton	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	Ψ20.70	Ψ100	Lilianoca		
Clinton	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Clinton	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Clinton	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	-
Clinton	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	Ψ44.90	ΨΟ	Lilianceu	Octiones	
Clinton	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Clinton			PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Clinton	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020) SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	\$11.00	ΦU	Ennanceu		•
	Unicare Life & Health Ins. Company		PFFS		\$28.70	\$0	Fahanaad	Generics	
Clinton	Unicare Life & Health Ins. Company Advantra® Freedom	SecurityChoice Enhanced Plus (H0540-032) Freedom 2 (H0846-005)	PFFS *	\$56.00 \$0.00	\$28.70	\$0	Enhanced	Genencs	•
Coles									
Coles	Health Alliance Medical Plans	Health Alliance Medicare HMO30 (H1463-002)	Local HMO *	\$51.00					
Coles	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00	<b>#</b> 00.00	<b>C</b> O	Di-		
Coles	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx (H1463-004)	Local HMO	\$88.20	\$30.30	\$0	Basic		•
Coles	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Coles	Health Alliance Medical Plans	Health Alliance Medicare HMO20 (H1463-001)	Local HMO *	\$91.00				0 '	
Coles	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx Plus (H1463-006)	Local HMO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Coles	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Coles	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Coles	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx (H1463-003)	Local HMO	\$128.20	\$30.30	\$0	Basic		•
Coles	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx Plus (H1463-005)	Local HMO	\$137.10	\$39.20	\$0	Enhanced	Generics	•
Coles	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Coles	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	-
		, , , , , , , , , , , , , , , , , , ,		·		**		Generics	•
Coles	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Coles	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Coles	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Coles	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Coles	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Coles	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Coles	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Coles	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Coles	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Coles	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Coles	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Coles	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Cook	Aetna Medicare	Aetna Golden Medicare Value Plan (H1419-001)	Local HMO	\$0.00	\$0.00	\$0	Basic		•
Cook	Aetna Medicare	Aetna Golden Medicare Special Plan (H1419-004)	Local HMO	\$15.00	\$15.00	\$0	Basic		٠
Cook	Aetna Medicare	Aetna Golden Medicare Standard Plan (H1419-002)	Local HMO	\$33.00	\$33.00	\$0	Enhanced	Generics	•
Cook	Aetna Medicare	Aetna Golden Choice Standard Plan (H1420-001)	Local PPO	\$58.00	\$18.80	\$0	Basic		•
Cook	Aetna Medicare	Aetna Golden Medicare Premier Plan (H1419-003)	Local HMO	\$68.00	\$40.50	\$0	Enhanced	Generics	•
Cook	Aetna Medicare	Aetna Golden Choice Premier Plan (H1420-002)	Local PPO	\$133.00	\$53.00	\$0	Enhanced	Generics	•
Cook	HealthSpring, Inc.	HealthSpring Advantage (H1415-013)	Local HMO *	\$0.00					
Cook	HealthSpring, Inc.	HealthSpring Advantage Basic (H1415-012)	Local HMO	\$0.00	\$0.00	\$265	Basic		
Cook	HealthSpring, Inc.	HealthSpring Advantage PremieRx (H1415-008)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Cook	Humana Health Plan, Inc.	Humana Gold Plus HMO H1406-013 (H1406-013)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Cook	Humana Health Plan, Inc.	Humana Gold Plus HMO H1406-006 (H1406-006)	Local HMO	\$99.00	\$27.80	\$0	Enhanced		•
Cook	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	1				

				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Cook	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Cook	Humana Insurance Company	HumanaChoicePPO PPO H1418-002 (H1418-002)	Local PPO	\$99.00	\$25.70	\$0	Enhanced		•
Cook	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Cook	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Cook	Sierra Optima	Sierra Optima (H4449-007)	PFFS*	\$218.20	Ψ2 1.00	Ψΰ	Ermanooa		<u> </u>
Cook	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00		1			
Cook	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Cook	Today's Option	Today's Options Value (H5421-032)	PFFS*	\$48.00	Ψ20.70	Ψ100	Lillanceu		
Cook	Today's Option	Today's Options Premier (H5421-034)	PFFS*	\$72.00					
Cook	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Cook	Today's Option	Today's Options Premier Plus (H5421-040)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Cook	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	\$44.90	Φ0	Ellianceu	Genencs	<del></del>
	WellCare	WellCare Choice (H1416-002)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	<del>                                     </del>
Cook	WellCare	WellCare Value (H1416-002)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Genencs	•
Cook					\$0.00	\$0	Ennanced		•
Crawford	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00	-	<del>                                     </del>	<del>                                     </del>	1	-
Crawford	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00			-		<u> </u>
Crawford	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Crawford	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Crawford	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Crawford	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Crawford	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Crawford	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Crawford	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Crawford	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	40.00	7-			
Crawford	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Crawford	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
Crawford	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00	Ψ200	Ų.	240.0		
Crawford	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Crawford	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20			İ		
Crawford	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Crawford	Today's Option	Today's Options Value (H5421-035)	PFFS*	\$12.00	Ψ20.70	ψ100	Lilianoca		<u> </u>
Crawford	Today's Option	Today's Options Premier (H5421-037)	PFFS*	\$35.00					+
Crawford	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		
Crawford	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Crawford	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	Ψ-1-50	ΨΟ	Lilianoca	Generics	<del></del>
Crawford	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00			1		1
Crawford	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Crawford	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	Ψ11.00	ΨΟ	Lilianceu		•
Crawford	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Conorice	<del>                                     </del>
		, ,			φ20.7U	φυ	Ennanceu	Generics	•
Cumberland	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS * Local PPO *	\$0.00					
Cumberland	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)		\$51.00	<b>\$00.00</b>	<b>C</b> O	D i .		
Cumberland	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic	0 1	•
Cumberland	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Cumberland	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Cumberland	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Cumberland	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Cumberland	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced	1	
Cumberland	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	Ψ3.00	70	a	1	<u> </u>
Cumberland	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Cumberland	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic	<del> </del>	

indicates plan doe	s not offer Part D drug coverage.			NA Al- I					066
				Monthly					Offers
				Consolidated	Manuallala	0	D	Generics  Generics  Generics  Generics  Generics  Generics  Generics	Variable
			Tomas of Marillanes	Premium	Monthly	Annual	Drug	J.	Drug
0	OIti N	Disc. Marris	Type of Medicare	(Includes	Drug	Drug	Benefit		Co-
County	Organization Name	Plan Name Sierra Optima (H4449-006)	Health Plan PFFS *	Part C + D) \$81.40	Premium	Deductible	Type	Offered in the Gap	payments
Cumberland	Sierra Optima		PFFS*						
Cumberland	Sierra Optima	Sierra Optima Plus (H4449-003)		\$149.20	<b>#00.70</b>	<b>#</b> 400	Enhanced		
Cumberland	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS *	\$28.70 \$12.00	\$28.70	\$100	Enhanced		•
Cumberland	Today's Option	Today's Options Value (H5421-035)	PFFS*	\$12.00					
Cumberland	Today's Option	Today's Options Premier (H5421-037)	PFFS	\$35.00 \$44.00	\$31.90	ФO.	Dasia		
Cumberland	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$80.00	\$44.90	\$0 \$0	Basic	Conorina	•
Cumberland Cumberland	Today's Option UniCare	Today's Options Premier Plus (H5421-043) Save Well - Plan II (H7289-002)	MSA *	\$0.00	\$44.90	\$0	Enhanced	Generics	•
Cumberland	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Cumberland	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		
Cumberland	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	\$11.00	φU	Ennanced		•
Cumberland	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Conorics	•
De Witt	Health Alliance Medical Plans	Health Alliance Medicare HMO30 (H1463-002)	Local HMO *	\$51.00	\$20.70	Φ0	Ennanced	Genetics	•
De Witt	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
De Witt		1 /	Local HMO		\$30.30	\$0	Dania		
De Witt	Health Alliance Medical Plans Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx (H1463-004) Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20 \$88.20	\$30.30	\$0	Basic Basic		•
De Witt	Health Alliance Medical Plans	Health Alliance Medicare HMO20 (H1463-001)	Local HMO *	\$91.00	\$30.30	φU	Dasic		•
De Witt	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx Plus (H1463-006)	Local HMO	\$97.00	\$39.20	\$0	Enhanced	Conorine	
De Will	Health Alliance Medical Plans	Health Alliance Medicare HMO30 RX Plus (H1463-006)	Local HIVIO	\$97.10	\$39.20	\$0	Ennanced	Generics	•
De Witt	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
De Witt	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
De Witt	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx (H1463-003)	Local HMO	\$128.20	\$30.30	\$0	Basic		•
De Witt	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx Plus (H1463-005)	Local HMO	\$137.10	\$39.20	\$0	Enhanced	Generics	•
De Witt	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
De Witt	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
De Witt	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
De Witt	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
De Witt	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
De Witt	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
De Witt	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00	4=0110	7.			
De Witt	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
De Witt	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	•
De Witt	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Brands Generics and	•
Do Witt	Siarra Ontima	Sierra Optima (H4449-007)	PFFS*	\$218.20				Brands	
De Witt	Sierra Optima	1 \ /					<del>                                     </del>	-	
De Witt	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	#00.70	<b>#400</b>	- Cobs.	<del>                                     </del>	
De Witt	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS *	\$28.70	\$28.70	\$100	Enhanced	-	•
De Witt	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00			<del>                                     </del>	<del>                                     </del>	
De Witt	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00	CO4 00	r c	De-i-		
De Witt	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic	Conorino	•
De Witt	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS MCA *	\$117.00	\$44.90	\$0	Enhanced	Generics	•
De Witt	UniCare	Save Well - Plan III (H7289-003)	MSA * PFFS *	\$0.00			<del>                                     </del>	<del>                                     </del>	
DeKalb	Advantra® Freedom	Freedom 2 (H0846-005)		\$0.00			<del>                                     </del>	<del>                                     </del>	
DeKalb	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	<b>#00.40</b>	r c	Derin	<del> </del>	
DeKalb	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic	1	•
DeKalb	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
DeKalb	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced	-	•
DeKalb	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00			-	1	
DeKalb	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20			ļ		
DeKalb	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	ĺ	ĺ			

marcated plant de	pes not offer Part D drug coverage.			Manalalia					055
				Monthly					Offers
				Consolidated	Manuallala	0	Down	T	Variable
			T (11 !!	Premium	Monthly	Annual	Drug	Type of	Drug
		DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
DeKalb	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
DeKalb	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
DeKalb	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00	<b>#</b> 04.00	•	Б.		
DeKalb	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic	Comordos	•
DeKalb	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
DeKalb	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
DeKalb	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00	<b>#</b> 44.00	<b>C</b> O	Fabruard		
DeKalb DeKalb	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
DeKalb	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	<b>#</b> 00 <b>7</b> 0	•		Comordos	
DeKalb	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Douglas	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Douglas	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Douglas	Health Alliance Medical Plans	Health Alliance Medicare HMO30 (H1463-002)	Local HMO *	\$51.00					
Douglas	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00		-			
Douglas	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx (H1463-004)	Local HMO	\$88.20	\$30.30	\$0	Basic		•
Douglas	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Douglas	Health Alliance Medical Plans	Health Alliance Medicare HMO20 (H1463-001)	Local HMO *	\$91.00					
Douglas	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx Plus (H1463-006)	Local HMO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Douglas	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Douglas	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Douglas	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx (H1463-003)	Local HMO	\$128.20	\$30.30	\$0	Basic		•
Douglas	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx Plus (H1463-005)	Local HMO	\$137.10	\$39.20	\$0	Enhanced	Generics	•
Douglas	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Douglas	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Douglas	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Douglas	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Douglas	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Douglas	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Douglas	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Douglas	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Douglas	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Douglas	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Douglas	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Douglas	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Douglas	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Douglas	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Douglas	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Douglas	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Douglas	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Douglas	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Douglas	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Douglas	WellCare	Concert (H4577-014)	PFFS	\$81.00	\$38.20	\$0	Enhanced		•
Douglas	WellCare	Summit (H4577-009)	PFFS	\$181.00	\$43.10	\$0	Enhanced		•
DuPage	Aetna Medicare	Aetna Medicare Open Standard Plan (H5736-007)	PFFS	\$103.00	\$27.00	\$0	Enhanced	Generics	•
DuPage	Aetna Medicare	Aetna Medicare Open Premier Plan (H5736-008)	PFFS	\$163.00	\$61.20	\$0	Enhanced	Generics	•
DuPage	HealthSpring, Inc.	HealthSpring Advantage (H1415-009)	Local HMO *	\$0.00					
DuPage	HealthSpring, Inc.	HealthSpring Advantage Basic (H1415-014)	Local HMO	\$0.00	\$0.00	\$265	Basic		
DuPage	HealthSpring, Inc.	HealthSpring Advantage PremieRx (H1415-004)	Local HMO	\$16.70	\$16.70	\$0	Enhanced	Generics	•
DuPage	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	Ţ. J J	7.			
DuPage	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic	1	•

" indicates plan do	pes not offer Part D drug coverage.			Manadala					055
				Monthly					Offers
				Consolidated	Manuallala	0	D	T 6	Variable
			Tomas of Marillanes	Premium	Monthly	Annual	Drug	Type of	Drug
		DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
DuPage	Humana Insurance Company	HumanaChoicePPO PPO H1418-002 (H1418-002)	Local PPO	\$99.00	\$25.70	\$0	Enhanced		•
DuPage	Humana Insurance Company	Humana Gold Choice PFFS H1407-001 (H1407-001)	PFFS	\$149.00	\$27.50	\$0	Enhanced		•
DuPage	Humana Insurance Company	Humana Gold Choice PFFS H1407-003 (H1407-003)	PFFS	\$179.00	\$28.30	\$0	Enhanced		•
DuPage	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
DuPage	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00		4			
DuPage	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
DuPage	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
DuPage	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
DuPage	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
DuPage	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
DuPage	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
DuPage	United HealthCare Insurance Company	Erickson Advantage Signature without Drugs (H3435-002)	Demo *	\$90.00					
DuPage	United HealthCare Insurance Company	Erickson Advantage Signature with Drugs (H3435-001)	Demo	\$126.00	\$18.80	\$0	Enhanced		•
Edgar	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Edgar	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Edgar	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Edgar	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Edgar	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Edgar	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00		1			
Edgar	Health Alliance Medical Plans Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001) Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		
Edgar	Health Alliance Medical Plans Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002) Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$138.20	\$30.30	\$0	Enhanced	Generics	•
Edgar	Health Alliance Medical Flans	Health Alliance Medicale PPO10 RX Plus (H1417-005)	Local PPO	\$147.10	φ39.20	φυ	Ennanced	Generics	•
Edgar	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Edgar	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Edgar	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Edgar	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Edgar	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Edgar	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Edgar	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Edgar	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Edgar	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Edgar	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Edgar	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Edgar	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Edgar	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Edgar	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Edgar	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Edgar	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Edgar	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Edwards	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00	4-011-0				
Edwards	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Edwards	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Edwards	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	ψυ.υυ	Ψυ			
Edwards	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced	1	•
Edwards	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Edwards	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00	Ψ20.10	ΨΟ	Dasio	<u> </u>	<b>-</b>
Edwards	Sierra Optima	Sierra Optima (H4449-006)	PFFS*	\$81.40				<u> </u>	
Edwards	Sierra Optima	Sierra Optima (114449-000)	PFFS*	\$149.20				<u> </u>	
Edwards	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Edwards	Today's Option	Today's Options Value (H5421-035)	PFFS*	\$12.00	φ20.70	φιου	Lillanced		•
			PFFS*		-	<del>                                     </del>		-	
Edwards	Today's Option	Today's Options Premier (H5421-037)	PFF5 "	\$35.00	1		1		l

County	" Indicates plan doe	es not offer Part D drug coverage.								
Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property   Property					Monthly					Offers
Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Cont										
Secret   Organization Name										
Todays Option					•	3			3	
Today's Option									Offered in the Gap	payments
						\$44.90	\$0	Enhanced	Generics	•
Control			,							
Effendent						\$11.00	\$0	Enhanced		•
Effingham   Advantaria Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   F	Edwards									
Health Allance Medical Plars						\$28.70	\$0	Enhanced	Generics	•
Health Allance Medical Plaras   Health Allance Medical Plaras   Health Allance Medicare PPO30 R (H1417-005)   Local PPO   \$88.20   \$30.30   \$0   Enhanced Corner's	Effingham									
Health Alliance Modical Plans	Effingham									
Health Alliance Medical Plans	Effingham					\$30.30		Basic		•
Health Alliance Medical Plans	Effingham	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Effingham										
Humana Insurance Company	Effingham	Health Alliance Medical Plans		Local PPO	\$138.20	\$30.30	\$0	Basic		•
Effingham   Humana Insurance Company   Humana ChoicePPO PPO R5826-009   Regional PPO   \$71.00   \$26.10   \$0   Basic   • Effingham   Humana Insurance Company   Humana Gold Choice PFFS H1804-125   PFFS   \$129.00   \$24.30   \$0   Enhanced   • Effingham   Effingham   Humana Insurance Company   Humana Gold Choice PFFS H1804-198   H1804-198   PFFS   \$129.00   \$24.30   \$0   Enhanced   • Effingham   Sierra Optima   Si	Effingham	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Humana Insurance Company	Effingham	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Effingham   Humana Insurance Company   Humana Gold Choice PFFS H1804-198 (H1804-198)   PFFS   \$12.90   \$24.30   \$0   Enhanced   • Effingham   Siera Optima   Siera Optima   Siera Optima   Siera Optima   PFFS   \$149.20   • Effingham   Siera Optima   Siera Optim	Effingham	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Effingham   Humana Insurance Company   Humana Gold Choice PFFS H1804-198 (H1804-198)   PFFS   \$12.90   \$24.30   \$0   Enhanced   • Effingham   Siera Optima   Siera Optima   Siera Optima   Siera Optima   PFFS   \$149.20   • Effingham   Siera Optima   Siera Optim	Effingham	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Effingham   Sherra Optima   Sierra Optima   Sierra Optima   Sierra Optima   Sherra Optima		Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Steffing Life Insurance Company   Steffing Option II (H5006-010)   PFFS   \$28.70   \$28.70   \$100   Enhanced   Fiftingham   Today's Option   Today's Options Premit   Today's Options Premit   Today's Option   Today's Options Premit   Today's Opt	Effingham	Sierra Optima		PFFS *	\$81.40					
Steffing Life Insurance Company   Steffing Option II (H5006-010)   PFFS   \$28.70   \$28.70   \$100   Enhanced   Fiftingham   Today's Option   Today's Options Premit   Today's Options Premit   Today's Option   Today's Options Premit   Today's Opt	Effingham	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Effingham   Today's Option   Today's O				PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Today's Option	Effingham	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Effingham	Effingham	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Effingham	Effingham	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Fayette   Humana Insurance Company   HumanaChoicePPO PPO R5826-023 (R5826-023)   Regional PPO   \$0.00	Effingham	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Humana Insurance Company	Effingham	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Humana Insurance Company	ayette	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Humana Insurance Company	ayette	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Fayette   Sierra Optima   Sierra Optima   Sierra Optima (H4449-007)   PFFS   \$218.20		Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)		\$109.00	\$22.90	\$0	Enhanced		•
Fayette   Sierra Optima   Sierra Optima   Sierra Optima (H4449-007)   PFFS   \$218.20	avette	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Sterling Life Insurance Company				PFFS *						
Fayette				PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Fayette   Today's Option   Today's Options Premier (H5421-034)   PFFS   \$72.00		Todav's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Fayette   Today's Option   Today's Options Value Plus (H5421-040)   PFFS   \$80.00   \$31.90   \$0   Basic   Fayette   Today's Option   Today's Options Premier Plus (H5421-041)   PFFS   \$117.00   \$44.90   \$0   Enhanced   Generics   Fayette   UniCare   Save Well - Plan III (H7289-003)   MSA   \$0.00   Ford   Advantra® Freedom   Freedom   Freedom 3 (H0846-006)   PFFS   \$0.00   Ford   Health Alliance Medical Plans   Health Alliance Medicare HMO30 (H1463-002)   Local HMO   \$51.00   Ford   Health Alliance Medical Plans   Health Alliance Medicare PPO30 (H1417-003)   Local PPO   \$51.00   Ford   Health Alliance Medical Plans   Health Alliance Medicare PPO30 (R1417-004)   Local PPO   \$88.20   \$30.30   \$0   Basic   • Ford   Health Alliance Medical Plans   Health Alliance Medicare PPO30 Rx (H1463-004)   Local PPO   \$88.20   \$30.30   \$0   Basic   • Ford   Health Alliance Medical Plans   Health Alliance Medicare PPO30 Rx (H1463-001)   Local PPO   \$88.20   \$30.30   \$0   Basic   • Ford   Health Alliance Medical Plans   Health Alliance Medicare HMO30 Rx Plus (H1463-006)   Local HMO   \$97.10   \$39.20   \$0   Enhanced   Generics   • Ford   Health Alliance Medical Plans   Health Alliance Medicare PPO30 Rx Plus (H1417-006)   Local PPO   \$97.10   \$39.20   \$0   Enhanced   Generics   • Ford   Health Alliance Medical Plans   Health Alliance Medicare PPO30 Rx Plus (H1417-006)   Local PPO   \$97.10   \$39.20   \$0   Enhanced   Generics   • Ford   Health Alliance Medical Plans   Health Alliance Medicare PPO30 Rx Plus (H1417-001)   Local PPO   \$97.10   \$39.20   \$0   Enhanced   Generics   • Ford   Health Alliance Medical Plans   Health Alliance Medicare PPO30 Rx Plus (H1463-003)   Local HMO   \$128.20   \$30.30   \$0   Basic   • Ford   Health Alliance Medical Plans   Health Alliance Medicare PPO30 Rx Plus (H1463-005)   Local HMO   \$137.10   \$39.20   \$0   Enhanced   Generics   • Ford   Health Alliance Medical Plans   Health Alliance Medicare PPO30 Rx Plus (H1463-005)   Local HMO   \$137.10   \$39.20   \$0   Enhanced   Generics   • Ford   Health Allianc										
Fayette   Today's Option   Today's Options Premier Plus (H5421-041)   PFFS   \$117.00   \$44.90   \$0   Enhanced   Generics						\$31.90	\$0	Basic		•
Fayette   UniCare   Save Well - Plan III (H7289-003)   MSA * \$0.00									Generics	•
Ford Advantra® Freedom Freedom Freedom 3 (H0846-006) PFFS * \$0.00  Ford Health Alliance Medical Plans Health Alliance Medicare PMO30 (H1463-002) Local HMO * \$51.00  Ford Health Alliance Medical Plans Health Alliance Medicare PPO30 (H1417-003) Local PPO * \$51.00  Ford Health Alliance Medical Plans Health Alliance Medicare PMO30 Rx (H1463-004) Local PPO * \$51.00  Ford Health Alliance Medical Plans Health Alliance Medicare PMO30 Rx (H1463-004) Local PPO \$88.20 \$30.30 \$0 Basic • Ford Health Alliance Medical Plans Health Alliance Medicare PMO30 Rx (H1417-004) Local PPO \$88.20 \$30.30 \$0 Basic • Ford Health Alliance Medical Plans Health Alliance Medicare PMO30 Rx Plus (H1463-001) Local HMO * \$91.00  Ford Health Alliance Medical Plans Health Alliance Medicare PMO30 Rx Plus (H1463-006) Local HMO \$97.10 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare PMO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-001) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx (H1417-001) Local PPO \$101.00 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare PMO30 Rx (H1463-003) Local PPO \$30.30 \$0 Basic • Ford Health Alliance Medical Plans Health Alliance Medicare PMO30 Rx (H1463-005) Local PPO \$30.30 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare HMO30 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare HMO30 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare HMO30 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare HMO30 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medicare PMO30 Rx Plus (H1463						*				
Health Alliance Medical Plans Health Alliance Medicare HMO30 (H1463-002) Local HMO * \$51.00 Ford Health Alliance Medical Plans Health Alliance Medicare PPO30 (H1417-003) Local PPO * \$51.00 Ford Health Alliance Medical Plans Health Alliance Medicare HMO30 Rx (H1463-004) Local HMO \$88.20 \$30.30 \$0 Basic • Health Alliance Medicare PPO30 Rx (H1417-004) Local PPO \$88.20 \$30.30 \$0 Basic • Health Alliance Medicare PPO30 Rx (H1417-004) Local HMO \$91.00 Ford Health Alliance Medicare PPO30 Rx Plus (H1463-001) Local HMO \$97.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medicare PPO30 Rx Plus (H1463-006) Local HMO \$97.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-001) Local PPO \$101.00 Ford Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx (H1463-003) Local HMO \$128.20 \$30.30 \$0 Basic • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-0										
Health Alliance Medical Plans Health Alliance Medicare PPO30 (H1417-003) Local PPO * \$51.00   Ford Health Alliance Medical Plans Health Alliance Medicare HMO30 Rx (H1463-004) Local HMO \$88.20 \$30.30 \$0 Basic • Ford Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx (H1417-004) Local PPO \$88.20 \$30.30 \$0 Basic • Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 (H1463-001) Local HMO * \$91.00   Ford Health Alliance Medical Plans Health Alliance Medicare HMO30 Rx Plus (H1463-006) Local HMO * \$97.10 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare PPO10 (H1417-001) Local PPO * \$101.00 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx (H1463-003) Local PPO * \$101.00 \$39.20 \$0 Enhanced Generics • Ford Health Alliance Medical Plans Health Alliance Medicare PMO20 Rx (H1463-003) Local PPO * \$101.00 \$30.30 \$0 Basic • Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-003) Local HMO \$128.20 \$30.30 \$0 Enhanced Generics •										
Health Alliance Medical Plans Health Alliance Medicare HMO30 Rx (H1463-004) Local HMO \$88.20 \$30.30 \$0 Basic •  Ford Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx (H1417-004) Local PPO \$88.20 \$30.30 \$0 Basic •  Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 (H1463-001) Local HMO * \$91.00 \$91.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.00 \$10.0										
Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx (H1417-004) Local PPO \$88.20 \$30.30 \$0 Basic •  Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 (H1463-001) Local HMO * \$91.00 \$  Ford Health Alliance Medical Plans Health Alliance Medicare HMO30 Rx Plus (H1463-006) Local HMO * \$97.10 \$39.20 \$0 Enhanced Generics •  Ford Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO * \$97.10 \$39.20 \$0 Enhanced Generics •  Ford Health Alliance Medical Plans Health Alliance Medicare PPO10 (H1417-001) Local PPO * \$101.00 \$  Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-003) Local HMO \$128.20 \$30.30 \$0 Basic •  Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics •						\$30.30	\$0	Basic		•
Health Alliance Medical Plans Health Alliance Medicare HMO20 (H1463-001) Local HMO * \$91.00 \$97.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-001) Local PPO * \$101.00 Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-003) Local HMO \$128.20 \$30.30 \$0 Basic • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Hocal HMO \$137.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Hocal HMO \$137.10 \$39.20 \$0 Enhanced Generics • Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Hocal HMO \$137.10 \$39.20 \$0 Enhanced Generics										•
Health Alliance Medical Plans Health Alliance Medicare HMO30 Rx Plus (H1463-006) Local HMO \$97.10 \$39.20 \$0 Enhanced Generics  Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics  Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-001) Local PPO * \$101.00  Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-003) Local HMO \$128.20 \$30.30 \$0 Basic  Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Health Alliance Medical Plans										
Ford Health Alliance Medical Plans Health Alliance Medicare PPO10 (H1417-001) Local PPO * \$101.00 Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-003) Local HMO \$128.20 \$30.30 \$0 Basic • Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics •						\$39.20	\$0	Enhanced	Generics	•
Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-003) Local HMO \$128.20 \$30.30 \$0 Basic • Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics •	ord	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx (H1463-003) Local HMO \$128.20 \$30.30 \$0 Basic • Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics •	Ford	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00				<u> </u>	
Ford Health Alliance Medical Plans Health Alliance Medicare HMO20 Rx Plus (H1463-005) Local HMO \$137.10 \$39.20 \$0 Enhanced Generics •						\$30.30	\$0	Basic		
Find Hall All and Market Disco.									Generics	
	Ford	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic	1	•

Control   Control Name	indicates plan does	not offer Part D drug coverage.								011
Description   Park Marco   Pa					Monthly					Offers
Pass Rane										Variable
County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   County   C						,			J1	Drug
Front			a			3	3			Co-
Ford										
Ford	rd	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
First	rd	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Ford	rd	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Secure Force	rd	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serra Optima   Serva	rd	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Serra Optima   Serra Optima   Serra Optima   Pise   (144440-033)   PFFS   \$149,20	rd	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Sterling   Me   Insurance Company   Sterling Option   (145006-011)   PFFS   \$30.0	rd	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Stefing   Berling   Berling   Stefing   Delton   H145006-010   PFFS   \$26.70   \$28.70   \$28.70   \$28.70   \$28.70   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$7.00   \$	rd	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Ford	rd	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Ford	rd	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Ford				PFFS *	\$12.00	·	·			
Ford	rd	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Ford	rd			PFFS	\$44.00	\$31.90	\$0	Basic		•
Ford	rd			PFFS	\$80.00		\$0	Enhanced	Generics	•
Ford							,			
Ford			\ '							
Ford						\$11.00	\$0	Enhanced		•
Ford			, ,				7-			
Franklin						\$28.70	\$0	Enhanced	Generics	•
Franklin						Ψ20σ	<b>4</b> 5	2		_
Franklin						\$26.10	\$0	Basic		•
Franklin										•
Franklin   Sierra Optima   Sierra Optima   Sierra Optima (H4449-007)   PFFS   \$218.20										•
Franklin						Ψ2 1.00	Ψΰ	Emilanooa		
Franklin   Today's Option   Today's Options Value (H5421-032)						\$28.70	\$100	Enhanced		•
Franklin		Ŭ ,	3 - 1			Ψ20.70	Ψ100	Liliancea		-
Franklin										
Franklin						\$31.90	\$0	Rasic		•
Franklin			, , , , , , , , , , , , , , , , , , , ,						Conorics	-
Fulton   Advantra® Freedom   Freedom 3 (H0846-008)   PFFS   \$0.00						Ψ44.30	ΨΟ	Lillanceu	Generies	•
Fulton   Humana Insurance Company   HumanaChoicePPO PPO R5826-023 (R5826-023)   Regional PPO * \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00			\ '							
Fulton   Humana Insurance Company   HumanaChoicePPO PPO R5826-009   Regional PPO   \$71.00   \$26.10   \$0   Basic   Fulton   Humana Insurance Company   Humana Gold Choice PFFS H1804-125 (H1804-125)   PFFS   \$109.00   \$22.90   \$0   Enhanced   Fulton   Humana Insurance Company   Humana Gold Choice PFFS H1804-192 (H1804-125)   PFFS   \$109.00   \$22.90   \$0   Enhanced   Fulton   Humana Insurance Company   Humana Gold Choice PFFS H1804-192 (H1804-198)   PFFS   \$129.00   \$22.90   \$0   Enhanced   Fulton   OSF Care Preferred   OSF Care Preferred (H5525-002)   Local PPO   \$53.00   Fulton   OSF Care Preferred   OSF Care Preferred Basic Rx (H5525-004)   Local PPO   \$93.00   \$39.50   \$0   Basic   Fulton   OSF Care Preferred   OSF Care Preferred Rx (H5525-004)   Local PPO   \$128.00   \$75.10   \$0   Enhanced   Fulton   OSF Care Preferred   OSF Care Preferred Rx (H5525-003)   Local PPO   \$128.00   \$75.10   \$0   Enhanced   Fulton   OSF Care Preferred   OSF Care Preferred Rx (H5525-003)   Local PPO   \$168.00   \$93.80   \$0   Enhanced   Fulton   Stering Life Insurance Company   Stering Option (H4449-007)   PFFS   \$218.20   Fulton   Stering Life Insurance Company   Stering Option (H5006-011)   PFFS   \$9.00   Fulton   Stering Life Insurance Company   Stering Option (H5006-010)   PFFS   \$28.70   \$28.70   \$100   Enhanced   Fulton   Today's Option   Today's Option Premier (H5421-034)   PFFS   \$72.00   Fulton   Today's Option   Today's Option Premier (H5421-034)   PFFS   \$72.00   Fulton   Today's Option   Today's Option Premier (H5421-034)   PFFS   \$117.00   \$44.90   \$0   Enhanced   Fulton   Today's Option   Today's Option Premier (H5421-034)   PFFS   \$117.00   \$44.90   \$0   Enhanced   Fulton   Today's Option   Today's Option Premier (H5421-034)   PFFS   \$117.00   \$44.90   \$0   Enhanced   Fulton   Today's Option   Today's Option Premier (H5421-034)   PFFS   \$117.00   \$44.90   \$0   Enhanced   Fulton   Humana Insurance Company   Humana Gold Choice PFFS H1804-137 (H1804-137)   PFFS   \$0.00   Fulton   Humana Insurance Company   Humana Gold C										
Fulton         Humana Insurance Company         Humana Gold Choice PFFS H1804-125 (H1804-125)         PFFS         \$109.00         \$22.90         \$0         Enhanced           Fulton         Humana Insurance Company         Humana Gold Choice PFFS H1804-136 (H1804-138)         PFFS         \$129.00         \$24.30         \$0         Enhanced           Fulton         OSF Care Preferred         OSF Care Preferred (H5525-002)         Local PPO         \$53.00         \$0           Fulton         OSF Care Preferred         OSF Care Preferred Basic Rx (H5525-004)         Local PPO         \$93.00         \$39.50         \$0         Basic           Fulton         OSF Care Preferred         OSF Care Preferred Rx (H5525-001)         Local PPO         \$128.00         \$75.10         \$0         Enhanced Generics and Brands           Fulton         OSF Care Preferred         OSF Care Preferred Rx Plus (H5525-003)         Local PPO         \$168.00         \$93.80         \$0         Enhanced Generics and Brands           Fulton         Sierra Optima         Sierra Optima (H4449-007)         PFFS *         \$218.20         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70         \$28.70 <td></td> <td></td> <td></td> <td></td> <td></td> <td>\$26.10</td> <td>0.2</td> <td>Racic</td> <td></td> <td>•</td>						\$26.10	0.2	Racic		•
Fulton   Humana Insurance Company   Humana Gold Choice PFFS H1804-198   H1804-198   PFFS   \$129.00   \$24.30   \$0   Enhanced   Fulton   OSF Care Preferred   OSF Care Preferred   (H5525-002)   Local PPO   \$53.00   \$39.50   \$0   Basic   Fulton   OSF Care Preferred   OSF Care Preferred Basic RX (H5525-004)   Local PPO   \$93.00   \$39.50   \$0   Basic   Fulton   OSF Care Preferred   OSF Care Preferred RX (H5525-001)   Local PPO   \$128.00   \$75.10   \$0   Enhanced   Generics and Brands   Fulton   OSF Care Preferred RX Plus (H5525-003)   Local PPO   \$168.00   \$93.80   \$0   Enhanced   Generics and Brands   Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics and Generics   Generics and Generics and Generics and Generics   Generics and Generics and Generics   Generics and Generics   Generics and Generics   Generics and Generics   Generics and Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generics   Generi										•
Fulton         OSF Care Preferred         OSF Care Preferred (H5525-002)         Local PPO*         \$53.00           Fulton         OSF Care Preferred         OSF Care Preferred Basic Rx (H5525-004)         Local PPO         \$93.00         \$39.50         \$0         Basic           Fulton         OSF Care Preferred         OSF Care Preferred Rx (H5525-001)         Local PPO         \$128.00         \$75.10         \$0         Enhanced Generics and Brands           Fulton         OSF Care Preferred         OSF Care Preferred Rx Plus (H5525-003)         Local PPO         \$168.00         \$93.80         \$0         Enhanced Generics and Brands           Fulton         Sierra Optima         Sierra Optima (H4449-007)         PFFS*         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20         \$218.20										
Fulton         OSF Care Preferred         OSF Care Preferred Basic Rx (H5525-004)         Local PPO         \$93.00         \$39.50         \$0         Basic           Fulton         OSF Care Preferred         OSF Care Preferred Rx (H5525-001)         Local PPO         \$128.00         \$75.10         \$0         Enhanced         Generics and Brands           Fulton         OSF Care Preferred         OSF Care Preferred Rx Plus (H5525-003)         Local PPO         \$168.00         \$93.80         \$0         Enhanced         Generics and Brands           Fulton         Sierra Optima         Sierra Optima (H4449-007)         PFFS*         \$218.20         Image: Sierra Optima (H4449-007)         PFFS*         \$218.20         Image: Sierra Optima (H4449-007)         PFFS*         \$218.20         Image: Sierra Optima (H4449-007)         PFFS*         \$218.20         Image: Sierra Optima (H4449-007)         PFFS*         \$218.20         Image: Sierra Optima (H4449-007)         PFFS*         \$218.20         Image: Sierra Optima (H4449-007)         PFFS*         \$218.20         Image: Sierra Optima (H4449-007)         PFFS*         \$218.20         Image: Sierra Optima (H4449-007)         PFFS*         \$218.20         Image: Sierra Optima (H4449-007)         PFFS*         \$218.20         Image: Sierra Optima (H4449-007)         PFFS*         \$228.70         \$100         Enhanced         Image: Sierr						φ24.30	φυ	Ellianceu		•
Fulton   OSF Care Preferred   OSF Care Preferred Rx (H5525-001)   Local PPO   \$128.00   \$75.10   \$0   Enhanced Brands						\$20.50	\$0	Pacie		•
Fulton   OSF Care Preferred   OSF Care Preferred Rx Plus (H5525-003)   Local PPO   \$168.00   \$93.80   \$0   Enhanced   Generics and Brands   Fulton   Sierra Optima   Sierra Optima (H4449-007)   PFFS   \$218.20										•
Fulton         Sierra Optima         Sierra Optima (H4449-007)         PFFS *         \$218.20         Serior         PFFS *         \$218.20         Serior         Serior         PFFS *         \$210.00         PFFS *         <	lton	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	•
Fulton         Sterling Life Insurance Company         Sterling Option I (H5006-011)         PFFS *         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00         \$9.00	Iton	Siorra Ontima	Siorra Ontima (H4440 007)	DEEC *	\$219.20				Branus	
Fulton         Sterling Life Insurance Company         Sterling Option II (H5006-010)         PFFS         \$28.70         \$100         Enhanced           Fulton         Today's Option         Today's Options Value (H5421-032)         PFFS *         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$48.00         \$4				_						
Fulton         Today's Option         Today's Options Value (H5421-032)         PFFS *         \$48.00         S48.00						\$29.70	\$100	Enhanced		•
Fulton         Today's Option         Today's Options Premier (H5421-034)         PFFS *         \$72.00         Save Use In June 1           Fulton         Today's Option         Today's Options Value Plus (H5421-040)         PFFS         \$80.00         \$31.90         \$0         Basic           Fulton         Today's Option         Today's Options Premier Plus (H5421-041)         PFFS         \$117.00         \$44.90         \$0         Enhanced         Generics           Fulton         UniCare         Save Well - Plan III (H7289-003)         MSA *         \$0.00         \$0         Enhanced         Generics           Gallatin         Humana Insurance Company         Humana Gold Choice PFFS H1804-137 (H1804-137)         PFFS         \$0.00         \$0         \$0         Enhanced           Gallatin         Humana Insurance Company         Humana ChoicePPO PPO R5826-023 (R5826-023)         Regional PPO *         \$0.00         \$0         Enhanced           Gallatin         Humana Insurance Company         Humana Gold Choice PFFS H1804-199 (H1804-199)         PFFS         \$20.00         \$0         Enhanced						ψ20.70	ψισο	Linanced		•
Fulton         Today's Option         Today's Options Value Plus (H5421-040)         PFFS         \$80.00         \$31.90         \$0         Basic           Fulton         Today's Option         Today's Options Premier Plus (H5421-041)         PFFS         \$117.00         \$44.90         \$0         Enhanced         Generics           Fulton         UniCare         Save Well - Plan III (H7289-003)         MSA *         \$0.00         \$0         \$0         Enhanced           Gallatin         Humana Insurance Company         Humana Gold Choice PFFS H1804-137 (H1804-137)         PFFS         \$0.00         \$0         \$0         Enhanced           Gallatin         Humana Insurance Company         Humana Gold Choice PFFS H1804-199 (H1804-199)         PFFS         \$20.00         \$0         Enhanced										
Fulton         Today's Option         Today's Options Premier Plus (H5421-041)         PFFS         \$117.00         \$44.90         \$0         Enhanced         Generics           Fulton         UniCare         Save Well - Plan III (H7289-003)         MSA *         \$0.00         \$0.00         \$0         Enhanced         \$0.00         \$0         \$0.00         \$0         Enhanced         \$0.00         \$0         \$0.00         \$0         \$0         Enhanced         \$0.00         \$0         \$0         \$0         Enhanced         \$0.00         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         <						\$31.00	\$0	Basic		•
Fulton         UniCare         Save Well - Plan III (H7289-003)         MSA *         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00									Coporice	•
Gallatin         Humana Insurance Company         Humana Gold Choice PFFS H1804-137 (H1804-137)         PFFS         \$0.00         \$0.00         \$0.00         Enhanced           Gallatin         Humana Insurance Company         HumanaChoicePPO PPO R5826-023 (R5826-023)         Regional PPO *         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00         \$0.00			, , , , , , , , , , , , , , , , , , , ,			ψ++.50	Ψυ	Linanced	OCHERCS	•
Gallatin         Humana Insurance Company         HumanaChoicePPO PPO R5826-023 (R5826-023)         Regional PPO *         \$0.00           Gallatin         Humana Insurance Company         Humana Gold Choice PFFS H1804-199 (H1804-199)         PFFS         \$20.00         \$0         Enhanced						\$0.00	¢n.	Enhanced		•
Gallatin         Humana Insurance Company         Humana Gold Choice PFFS H1804-199 (H1804-199)         PFFS         \$20.00         \$0         Enhanced				_	· · · · · · · · · · · · · · · · · · ·	φυ.υυ	φυ	Ellianced		•
						¢20.00	¢٥	Enhanced		<b>-</b>
Gallatin Humana Insurance Company HumanaChoicePPO PPO R5826-009 (R5826-009) Regional PPO \$71.00 \$26.10 \$0 Basic										•

maioatee plan a	oes not offer Part D drug coverage.								0.00
				Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Gallatin	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Gallatin	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Gallatin	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Gallatin	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Gallatin	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Gallatin	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Gallatin	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Gallatin	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Gallatin	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Gallatin	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Gallatin	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Greene	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Greene	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Greene	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Greene	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Greene	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Greene	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Greene	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Greene	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Greene	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Greene	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Greene	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Greene	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	*	7.			
Greene	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Greene	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Greene	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	Ψ11.00	Ψΰ	Elinanoca		
Greene	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	
Grundy	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	Ψ20.70	ΨΟ	Lilianoca	Generies	<del></del>
Grundy	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
Grundy	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		<del></del>
Grundy	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		
Grundy	Sierra Optima	Sierra Optima (H4449-007)	PFFS*	\$218.20	Ψ24.50	ΨΟ	Lilianceu		
Grundy	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Grundy	Today's Option	Today's Options Value (H5421-032)	PFFS*	\$48.00	\$20.70	\$100	Ellianceu		•
Grundy	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					-
Grundy	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		
	,	, , , , , , , , , , , , , , , , , , , ,	PFFS	\$117.00	\$44.90	\$0		Generics	•
Grundy	Today's Option	Today's Options Premier Plus (H5421-041)			\$44.90	\$0	Enhanced	Genencs	•
Grundy	UniCare	Save Well - Plan III (H7289-003)	MSA * PFFS	\$0.00 \$0.00	<b>CO.OO</b>	ΦO	Fabonese		
Hamilton	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	_		\$0.00	\$0	Enhanced		•
Hamilton	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	<b>#</b> 00.00	•			
Hamilton	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Hamilton	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Hamilton	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20		2122			
Hamilton	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Hamilton	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Hamilton	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00	L.				<u> </u>
Hamilton	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic	_	•
Hamilton	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Hamilton	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Hamilton	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Hamilton	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Hamilton	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Hamilton	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Hancock	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					

				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Hancock	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00			1		
Hancock	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Hancock	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Hancock	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
larioudit	Trouble 7 times roo modifical 1 faile	Trouble modification to Goo tax tide (TTTT Goo)	2004.1.0	ψοσ	<b>\$60.20</b>	Ψ.	2	Cononido	-
Hancock	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Hancock	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Hancock	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
ianoon.	Troditi 7 illianos Modical Filano	risaliti iliansa maasana i i a i a i a i i a a (i i i i i i a a a)	2000	ψ	<b>\$00.20</b>	Ψ.	21111011000		_
Hancock	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Hancock	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Hancock	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Hancock	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Hancock	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00	4=0110	7.			
Hancock	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Hancock	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	•
lanoook	our date i foliation	COT CATO 1 10101104 11X (110020 001)	Locarrio	ψ120.00	φισ.ισ	ΨΟ	Ermanooa	Brands	
Hancock	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	
larioudit	00. 00.01.00.00	00. 00.01.00.001.001.000.000	2004.1.0	<b>\$100.00</b>	ψοσίου	Ψ.	2	Brands	-
Hancock	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Hancock	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Hancock	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Hancock	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Hancock	Today's Option	Today's Options Value (H5421-035)	PFFS*	\$12.00	Ψ20.70	Ψ100	Lilianoca		
Hancock	Today's Option	Today's Options Premier (H5421-037)	PFFS*	\$35.00					
Hancock	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		
Hancock	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Hancock	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	Ψ-1.50	ΨΟ	Lilianoca	Generies	
Hancock	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Hancock	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		
Hancock	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	ψ11.00	ΨΟ	Lillanceu		_
Hancock	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	
Hardin	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS*	\$0.00	φ20.70	ΨΟ	Ellianceu	Generics	-
Hardin	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Hardin	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	\$0.00	φυ	Ellianceu		•
Hardin	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Hardin	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Hardin	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00	\$20.10	ΨΟ	Dasic		-
Hardin	Sierra Optima	Sierra Optima (H4449-006)	PFFS*	\$81.40					
Hardin	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$149.20			1	1	
Hardin	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Hardin Hardin	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$28.70	φ20.70	φ100	Ellianced	<del> </del>	•
Hardin Hardin	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$12.00			1	1	
Hardin Hardin	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic	<del> </del>	•
Hardin Hardin	Today's Option	Today's Options Premier Plus (H5421-042)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	
Hardin Hardin	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	Φ <del>44</del> .90	Φυ	Ellianced	Genetics	•
Henderson	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00			1	<del> </del>	
		HumanaChoicePPO PPO R5826-023 (R5826-023) HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
Henderson	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$26.10	\$0 \$0	Enhanced	<del>                                     </del>	
Henderson	Humana Insurance Company	1 /	PFFS					<del>                                     </del>	•
Henderson	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)		\$129.00	\$24.30	\$0	Enhanced	<del>                                     </del>	•
Henderson	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00	\$00.FC	<b>*</b> 0	D		
Henderson Henderson	OSF Care Preferred OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004) OSF Care Preferred Rx (H5525-001)	Local PPO	\$93.00	\$39.50	\$0	Basic	Conorias and	•
	II INE L BIO PROTOTROS	IUNE LARA PRATARRA RY (H5575-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	•

maicates plan doe	s not offer Part D drug coverage.								~"
			Type of Medicare	Monthly Consolidated Premium (Includes	Monthly Drug	Annual Drug	Drug Benefit	Type of Extra Coverage	Offers Variable Drug Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Henderson	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
Henderson	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Henderson	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Henderson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Henderson	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Henderson	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Henderson	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Henderson	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Henderson	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Henderson	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Henderson	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Henderson	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Henderson	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Henry	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Henry	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Henry	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Henry	Humana Insurance Company	Humana Gold Choice PFFS H1804-138 (H1804-138)	PFFS	\$39.00	\$25.40	\$0	Enhanced		•
Henry	Humana Insurance Company	Humana Gold Choice PFFS H1804-200 (H1804-200)	PFFS	\$59.00	\$26.40	\$0	Enhanced		•
Henry	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
Henry	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00	Ψ200	Ţ.	240.0		_
Henry	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Henry	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
Henry	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
Henry	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Henry	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Henry	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Henry	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Henry	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Henry	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Henry	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Henry	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Henry	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Henry	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Henry	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced	1	•
Henry	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	Ţ <b>u</b>	T-		İ	
Henry	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Henry	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Henry	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Henry	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Henry	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Iroquois	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00		<del>                                     </del>		<del> </del>	

County   Organization Name   Plan Name   Plan Name   Health Alliance Medicare PPO30 Rx Plus (H1417-006)   Local PPO   \$37.10   \$39.20   \$0   Enhanced   Cenetic Name   Plan Name   Health Alliance Medicare PPO30 Rx Plus (H1417-006)   Local PPO   \$37.10   \$39.20   \$0   Enhanced   Cenetic Name   Plan Name   Plan Name   Plan Name   Health Alliance Medicare PPO30 Rx Plus (H1417-006)   Local PPO   \$37.10   \$39.20   \$0   Enhanced   Cenetic Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan	Indicates plan doe	s not offer Part D drug coverage.								011
Country   Organization Name   Pent Name   Pent Name   Includes   Pent Name					Monthly					Offers
County   Organization Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name   Plan Name								_		Variable
County						,			J.	Drug
					•	3			Extra Coverage	Co-
									Offered in the Gap	
Integrated   Health Alliance Medical Plares   Humana Control Plares   Health Alliance Medical Plares   Humana Control Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Health Alliance Medical Plares   Hea	quois	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
	quois	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Humana Insurance Company	quois	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
	quois	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Integuals	quois	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
	quois	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
	quois	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
		Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
	quois	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Integuois   Today's Option   Today's Options   Today's Options   Today's Options   Peter   High-E41-034)   PFFS   \$72.00				PFFS		\$28.70	\$100	Enhanced		•
		Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Today's Option				PFFS *	\$72.00					
Today's Option				PFFS	\$80.00	\$31.90	\$0	Basic		•
Indiquois									Generics	•
Jackson   Human Insurance Company   HumanaChoicePPO PPO R5826-023 (R5826-023)   Regional PPO*   \$0.00			, , , , , , , , , , , , , , , , , , , ,			*******	**			
Jackson   Human Insurance Company   HumanaChoicePFO PPO R95826-009   Regional PPO   \$71.00   \$26.10   \$0   Basic     Jackson   Human Insurance Company   Humana Gold Choice PFFS H1804-125   PFFS   \$109.00   \$22.90   \$0   Enhanced     Jackson   Human Insurance Company   Humana Gold Choice PFFS H1804-198   PFFS   \$109.00   \$22.90   \$0   Enhanced     Jackson   Sierra Optima   Sierra Optima   Sierra Optima   Sierra Optima   Sierra Optima   PFFS   \$218.20   \$24.30   \$0   Enhanced     Jackson   Sierra Optima										
Jackson   Humana Insurance Company   Humana Gold Choice PFFS H1804-125   PFFS   \$109.00   \$22.90   \$0   Enhanced						\$26.10	\$0	Basic		•
Humana Insurance Company   Humana Gold Choice PFFS H1804-198 (H1804-198)   PFFS   \$129.00   \$24.30   \$0   Enhanced										•
Jackson   Sierra Optima   Sierra Optima   Sierra Optima (H4449-007)   PFFS   \$218.20										•
Jackson   Sterling Life Insurance Company   Sterling Option II (H5006-010)   PFFS   \$28.70   \$28.70   \$100   Enhanced						Ψ24.50	ΨΟ	Lilianceu		-
Jackson						¢20.70	¢100	Enhanced		•
Jackson   Today's Option   Today's Option   Today's Options Premier (H5421-034)   PFFS   \$72.00     Jackson   Today's Option   Today's Options Value Plus (H5421-040)   PFFS   \$80.00   \$31.90   \$0   Enhanced   Jackson   Today's Option   Today's Options Premier (H5421-040)   PFFS   \$117.00   \$44.90   \$0   Enhanced   Jackson   Today's Option   Today's Options Premier Plus (H5421-041)   PFFS   \$117.00   \$44.90   \$0   Enhanced   Jackson   UniCare   Save Well - Plan III (H7289-003)   MSA * \$0.00   Jackson   Jasper   Advantra® Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom						\$20.70	\$100	Ennanced		•
Jackson   Today's Option   Today's Options Value Plus (H5421-040)   PFFS   \$80.00   \$31.90   \$0   Basic   Jackson   Today's Option   Today's Options Premier Plus (H5421-041)   PFFS   \$117.00   \$44.90   \$0   Enhanced   Genetic Jackson   Jackson   UniCare   Save Well - Plan III (17289-005)   MSA   \$0.00   Jasper   Advantra® Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom   Freedom		, ,	, , , ,							
Jackson		,,,				<b>CO4.00</b>	<b>C</b> O	Di-		
Jackson   UniCare   Save Well - Plan III (H7289-003)		, ,	, , , , , , , , , , , , , , , , , , , ,				* -		Conorino	•
Jasper						\$44.90	\$0	Ennanced	Generics	•
Jasper   Health Alliance Medical Plans   Health Alliance Medicare PPO30 (H1417-003)   Local PPO										
Jasper   Health Alliance Medical Plans   Health Alliance Medicare PPO30 Rx (H1417-004)   Local PPO   \$88.20   \$30.30   \$0   Basic	•									
Health Alliance Medical Plans										
										•
Health Alliance Medical Plans	sper	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Health Alliance Medical Plans   Health Alliance Medicare PPO10 Rx Plus (H1417-005)   Local PPO   \$147.10   \$39.20   \$0   Enhanced   Generic Page 147.10	sper									
Jasper   Humana Insurance Company   Humana Gold Choice PFFS H1804-137 (H1804-137)   PFFS   \$0.00   \$0.00   \$0   Enhanced	sper									•
Jasper   Humana Insurance Company   Humana ChoicePPO PPO R5826-023 (R5826-023)   Regional PPO * \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.0	sper	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Jasper   Humana Insurance Company   HumanaChoicePPO PPO R5826-023 (R5826-023)   Regional PPO * \$0.00     Jasper   Humana Insurance Company   Humana Gold Choice PFFS H1804-199 (H1804-199)   PFFS   \$20.00   \$20.00   \$0   Enhanced     Jasper   Humana Insurance Company   HumanaChoicePPO PPO R5826-009 (R5826-009)   Regional PPO   \$71.00   \$26.10   \$0   Basic     Jasper   SecureHorizons MedicareDirect   SecureHorizons MedicareDirect Plan 10 (H5435-010)   PFFS * \$0.00     Jasper   Sierra Optima   Sierra Optima Plus (H4449-006)   PFFS * \$149.20     Jasper   Sterling Life Insurance Company   Sterling Option II (H5006-010)   PFFS * \$149.20     Jasper   Today's Option   Today's Options Value (H5421-035)   PFFS * \$12.00     Jasper   Today's Option   Today's Options Value (H5421-037)   PFFS * \$35.00     Jasper   Today's Option   Today's Options Premier (H5421-042)   PFFS   \$35.00     Jasper   Today's Option   Today's Options Premier Plus (H5421-042)   PFFS   \$44.00   \$31.90   \$0   Basic     Jasper   Today's Option   Today's Options Premier Plus (H5421-043)   PFFS   \$80.00   \$44.90   \$0   Enhanced     Jasper   Today's Option   Today's Options Premier Plus (H5421-043)   PFFS   \$80.00   \$44.90   \$0   Enhanced     Jasper   UniCare   Save Well - Plan II (H7289-002)   MSA * \$0.00   PFFS   \$0.00     Jasper   Unicare Life & Health Ins. Company   SecurityChoice Classic (H0540-001)   PFFS   \$0.00	sper	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Jasper   Humana Insurance Company   HumanaChoicePPO PPO R5826-009 (R5826-009)   Regional PPO   \$71.00   \$26.10   \$0   Basic		Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *						
Jasper   Humana Insurance Company   HumanaChoicePPO PPO R5826-009 (R5826-009)   Regional PPO   \$71.00   \$26.10   \$0   Basic	sper	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Jasper   SecureHorizons MedicareDirect   SecureHorizons MedicareDirect Plan 10 (H5435-010)   PFFS * \$0.00   SecureHorizons MedicareDirect Plan 10 (H5435-010)   PFFS * \$0.00   SecureHorizons MedicareDirect Plan 10 (H5435-010)   PFFS * \$1.40   SecureHorizons MedicareDirect Plan 10 (H5435-010)   PFFS * \$1.40   SecureHorizons MedicareDirect Plan 10 (H5449-006)   PFFS * \$1.40   SecureHorizons MedicareDirect Plan 10 (H5449-006)   PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHorizons PFFS * \$1.40   SecureHoriz		Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO			\$0			•
Jasper   Sierra Optima   Sierra Optima   Sierra Optima   H4449-006)   PFFS * \$81.40   Sierra Optima   PFFS * \$149.20   Sierra Optima   Sierra Optima   Sierra Optima   PFFS * \$149.20   Sierra Optima   Sierra Optima   Sierra Optima   PFFS * \$149.20   Sierra Optima   Sierra Optima   Sierra Optima   PFFS * \$28.70   \$28.70   \$100   Enhanced   Sierra Optima   Sierra Optima   Sierra Optima   PFFS * \$12.00   Sierra Optima   PFFS * \$12.00   Sierra Optima   Sierra O	•	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Jasper   Sierra Optima   Sierra Optima   Sierra Optima   PIUs (H4449-003)   PFFS * \$149.20     Sterling Life Insurance Company   Sterling Option II (H5006-010)   PFFS   \$28.70   \$28.70   \$100   Enhanced   Sterling Option II (H5006-010)   PFFS   \$28.70   \$28.70   \$100   Enhanced   Sterling Option II (H5006-010)   PFFS   \$12.00										
Jasper         Sterling Life Insurance Company         Sterling Option II (H5006-010)         PFFS         \$28.70         \$28.70         \$100         Enhanced           Jasper         Today's Option         Today's Options Value (H5421-035)         PFFS *         \$12.00         **           Jasper         Today's Option         Today's Options Premier (H5421-037)         PFFS *         \$35.00         **           Jasper         Today's Option         Today's Options Value Plus (H5421-042)         PFFS *         \$44.00         \$31.90         \$0         Basic           Jasper         Today's Option         Today's Options Premier Plus (H5421-043)         PFFS *         \$80.00         \$44.90         \$0         Enhanced           Jasper         UniCare         Save Well - Plan II (H7289-002)         MSA *         \$0.00         **         Enhanced           Jasper         Unicare Life & Health Ins. Company         SecurityChoice Classic (H0540-001)         PFFS *         \$0.00         **				PFFS *						
Jasper         Today's Option         Today's Options Value (H5421-035)         PFFS *         \$12.00         Strain (H5421-035)           Jasper         Today's Option         Today's Options Premier (H5421-037)         PFFS *         \$35.00         Strain (H5421-037)           Jasper         Today's Option         Today's Options Value Plus (H5421-042)         PFFS         \$44.00         \$31.90         \$0         Basic           Jasper         Today's Option         Today's Options Premier Plus (H5421-043)         PFFS         \$80.00         \$44.90         \$0         Enhanced         Generic           Jasper         UniCare         Save Well - Plan II (H7289-002)         MSA *         \$0.00         \$0         Enhanced         Generic           Jasper         Unicare Life & Health Ins. Company         SecurityChoice Classic (H0540-001)         PFFS *         \$0.00         \$0         \$0						\$28.70	\$100	Enhanced		•
Jasper         Today's Option         Today's Options Premier (H5421-037)         PFFS *         \$35.00         Solution           Jasper         Today's Option         Today's Options Value Plus (H5421-042)         PFFS         \$44.00         \$31.90         \$0         Basic           Jasper         Today's Option         Today's Options Premier Plus (H5421-043)         PFFS         \$80.00         \$44.90         \$0         Enhanced         Generic           Jasper         UniCare         Save Well - Plan II (H7289-002)         MSA *         \$0.00         \$0         Enhanced         Generic           Jasper         Unicare Life & Health Ins. Company         SecurityChoice Classic (H0540-001)         PFFS *         \$0.00         \$0         \$0						ψ <u></u> =3.7 0	Ψ.00		1	
Jasper         Today's Option         Today's Options Value Plus (H5421-042)         PFFS         \$44.00         \$31.90         \$0         Basic           Jasper         Today's Option         Today's Options Premier Plus (H5421-043)         PFFS         \$80.00         \$44.90         \$0         Enhanced         Generic           Jasper         UniCare         Save Well - Plan II (H7289-002)         MSA *         \$0.00         \$0         Enhanced         Generic           Jasper         Unicare Life & Health Ins. Company         SecurityChoice Classic (H0540-001)         PFFS *         \$0.00         \$0         \$0						t		1	1	
JasperToday's OptionToday's Options Premier Plus (H5421-043)PFFS\$80.00\$44.90\$0EnhancedGenericJasperUniCareSave Well - Plan II (H7289-002)MSA *\$0.00\$0\$0JasperUnicare Life & Health Ins. CompanySecurityChoice Classic (H0540-001)PFFS *\$0.00\$0\$0		,,,				\$31.90	\$0	Basic	1	
Jasper         UniCare         Save Well - Plan II (H7289-002)         MSA *         \$0.00           Jasper         Unicare Life & Health Ins. Company         SecurityChoice Classic (H0540-001)         PFFS *         \$0.00									Generics	•
Jasper Unicare Life & Health Ins. Company SecurityChoice Classic (H0540-001) PFFS * \$0.00			, , , , , , , , , , , , , , , , , , , ,			Ψ-7.50	ΨΟ	Lillancea	GCHCHC3	•
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		1 /	, , ,			¢20.70	<b>¢</b> 0	Enhanced	Generics	•

indicates plan doe	es not offer Part D drug coverage.			Monthly					Offices
				Monthly					Offers
				Consolidated				d Generics  d Generics	Variable
				Premium	Monthly	Annual	Drug		Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit		Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Jefferson	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Jefferson	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Jefferson	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Jefferson	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Jefferson	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Jefferson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Jefferson	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Jefferson	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Jefferson	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Jefferson	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Jefferson	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Jersey	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Jersey	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Jersey	Humana Insurance Company	Humana Gold Choice PFFS H1804-138 (H1804-138)	PFFS	\$39.00	\$25.40	\$0	Enhanced		•
Jersey	Humana Insurance Company	Humana Gold Choice PFFS H1804-200 (H1804-200)	PFFS	\$59.00	\$26.40	\$0	Enhanced		•
Jersey	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Jersey	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40	4=====	77			
Jersey	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Jersey	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					1
Jersey	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Jersey	Today's Option	Today's Options Value (H5421-032)	PFFS*	\$48.00	Ψ20.70	Ψ100	Lilianoca		<del></del>
Jersey	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					<del>                                     </del>
Jersey	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		
Jersey	Today's Option	Today's Options Premier Plus (H5421-040)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Conorice	
Jersey	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	Ψ44.30	ΨΟ	Lilianceu	Generics	<del></del>
Jo Daviess	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		
Jo Daviess Jo Daviess	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	\$0.00	φU	Ennanceu	<del> </del>	<u> </u>
Jo Daviess Jo Daviess	Humana Insurance Company Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$0.00	\$20.00	\$0	Fahanaad	<del> </del>	<del> </del>
Jo Daviess Jo Daviess		HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$20.00	\$20.00	\$0	Enhanced		•
	Humana Insurance Company	\ ,			\$26.10	\$0	Basic		•
Jo Daviess	Medical Associates Health Plan, Inc.	Medical Associates Advantage Plan (H1651-003)	Cost *	\$89.00					ļ
Jo Daviess	Medical Associates Health Plan, Inc.	MAHP Medicare Community Plan (H1651-005)	Cost *	\$99.00				ļ	<b></b>
Jo Daviess	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20				ļ	<b></b>
Jo Daviess	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced	<u> </u>	•
Jo Daviess	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00				<u> </u>	<b>_</b>
Jo Daviess	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00				<u> </u>	<b>_</b>
Jo Daviess	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Jo Daviess	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Jo Daviess	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					ļ
Jo Daviess	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00				<b></b>	<u> </u>
Jo Daviess	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced	<b></b>	•
Jo Daviess	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00				<u> </u>	<u> </u>
Jo Daviess	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Jo Daviess	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Jo Daviess	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Jo Daviess	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Jo Daviess	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Johnson	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00				<del>                                     </del>	<del>                                     </del>
,011110011			PFFS	\$0.00	\$0.00	\$0	Enhanced	+	•
Johnson	Humana Incurance Company								
Johnson Johnson	Humana Insurance Company Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137) HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	φ0.00	φυ	Ellianced		<del>                                     </del>

indicates plan do	es not offer Part D drug coverage.			Manalalia					066
				Monthly					Offers
				Consolidated				<b>-</b> .	Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Туре	Offered in the Gap	
Johnson	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Johnson	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Johnson	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Johnson	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Johnson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Johnson	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Johnson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Johnson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Johnson	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Johnson	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Johnson	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Johnson	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Johnson	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Johnson	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Kane	Aetna Medicare	Aetna Medicare Open Standard Plan (H5736-007)	PFFS	\$103.00	\$27.00	\$0	Enhanced	Generics	•
Kane	Aetna Medicare	Aetna Medicare Open Premier Plan (H5736-008)	PFFS	\$163.00	\$61.20	\$0	Enhanced	Generics	•
Kane	HealthSpring, Inc.	HealthSpring Advantage (H1415-009)	Local HMO *	\$0.00					
Kane	HealthSpring, Inc.	HealthSpring Advantage Basic (H1415-014)	Local HMO	\$0.00	\$0.00	\$265	Basic		
Kane	HealthSpring, Inc.	HealthSpring Advantage PremieRx (H1415-004)	Local HMO	\$16.70	\$16.70	\$0	Enhanced	Generics	•
Kane	Humana Health Plan, Inc.	Humana Gold Plus HMO H1406-022 (H1406-022)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Kane	Humana Health Plan, Inc.	Humana Gold Plus HMO H1406-014 (H1406-014)	Local HMO	\$89.00	\$26.10	\$0	Enhanced		•
Kane	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	<b>4</b> _0	**			
Kane	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
Kane	Humana Insurance Company	HumanaChoicePPO PPO H1418-002 (H1418-002)	Local PPO	\$99.00	\$25.70	\$0	Enhanced		<u> </u>
Kane	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		<u> </u>
Kane	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		-
Kane	SecureHorizons	MedicareComplete Plus Plan 1 (H3887-003)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		
Kane	SecureHorizons	MedicareComplete Plus Plan 2 (H3887-004)	Local HMO *	\$0.00	ψ0.00	ΨΟ	Lillanceu		
Kane	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Kane	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Kane	Sterling Life Insurance Company  Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00	\$20.70	\$100	Ennanced		•
Kane	Today's Option	Today's Options Value (H5421-032) Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Kane	, ,	, , , ,	PFFS	\$80.00	¢21.00	\$0	Basic		_
Kane	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$117.00	\$31.90 \$44.90			Generics	•
Kane	Today's Option	Today's Options Premier Plus (H5421-041)	MSA *		\$44.90	\$0	Enhanced	Genencs	•
Kane	UniCare	Save Well - Plan III (H7289-003)		\$0.00					
Kankakee	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Kankakee	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	<b>#</b> 00.40	•	Б.		
Kankakee	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Kankakee	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Kankakee	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Kankakee	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Kankakee	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Kankakee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced	1	•
Kankakee	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Kankakee	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Kankakee	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Kankakee	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Kankakee	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Kendall	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS*	\$0.00					
Kendall	Humana Health Plan, Inc.	Humana Gold Plus HMO H1406-022 (H1406-022)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Kendall	Humana Health Plan, Inc.	Humana Gold Plus HMO H1406-014 (H1406-014)	Local HMO	\$89.00	\$26.10	\$0	Enhanced		•
Kendall	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		

indicates plan de	oes not offer Part D drug coverage.	T							011
				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Туре	Offered in the Gap	
Kendall	Humana Insurance Company	HumanaChoicePPO PPO H1418-002 (H1418-002)	Local PPO	\$99.00	\$25.70	\$0	Enhanced		•
Kendall	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Kendall	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Kendall	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Kendall	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Kendall	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Kendall	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Kendall	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Kendall	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Kendall	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Kendall	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Kendall	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Kendall	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Kendall	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Kendall	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Kendall	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	*******	**			
Kendall	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Knox	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	Ψ20.70	ΨΟ	Emianoca	Continue	
Knox	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
Knox	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Knox	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Knox	OSF Care Advantage	OSF Care Advantage (H1468-005)	Local HMO *	\$54.00	Ψ24.50	ΨΟ	Lillanced		•
Knox	OSF Care Advantage OSF Care Advantage	OSF Care Advantage (H1460-005)  OSF Care Advantage Basic Rx (H1468-007)	Local HMO	\$94.00	\$40.10	\$0	Basic		
Knox	OSF Care Advantage OSF Care Advantage	OSF Care Advantage Basic RX (H1468-007) OSF Care Advantage RX (H1468-004)	Local HMO	\$129.00	\$75.30	\$0	Enhanced	Generics and	
KIIOX	OSF Care Advantage	OSF Care Advantage RX (F1466-004)	Local Hivio	\$129.00	\$75.50	ΦΟ	Ennanceu	Brands	•
Knox	OSF Care Advantage	OSF Care Advantage Rx Plus (H1468-006)	Local HMO	\$153.00	\$98.80	\$0	Enhanced	All Formulary Drugs	•
KIIOX	OSI Care Advantage	OSI Care Advantage (X ) lus (111400-000)	Local Filvio	ψ133.00	ψ90.00	ΨΟ	Lillanceu	All I officially Drugs	
Knox	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Knox	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		
Knox	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	
KIIOX	OSF Care Freieneu	OSF Care Freieneu RX (115525-001)	Local FFO	\$120.00	\$75.10	ΦΟ	Ellianceu	Brands	•
Knox	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	
KIIOX	OSF Care Presented	OSF Care Freieneu RX Plus (H5525-003)	Local PPO	\$100.00	\$93.00	Φ0	Ennanceu	Brands	•
Knox	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20				Dianus	
Knox	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Knox	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Knox	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00	\$20.70	\$100	Ellianceu		•
Knox	Today's Option	Today's Options Premier (H5421-034)	PFFS*	\$72.00					
Knox	Today's Option	Today's Options Premier (H5421-054)  Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		_
								Conorios	•
Knox	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS MCA *	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Knox	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	<b>#0.00</b>	<b>*</b>	E.L.		
Knox	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Knox	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00	-	-	-		
KIIOX	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HIVIO	φου.υυ					
Knox	United Healthours Diag of the Diver Valley In-	MedicareComplete Plus 45 (114450 045)	Local HMO	\$78.00	\$13.40	\$0	Enhance 1		
Knox	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HIVIO	\$78.00	\$13.40	\$0	Enhanced		•
l/new	Heitad Ingliberra Dies - Cit - Diese Vall	Madiana Campleta Diva Dries - (U14450 047)	Leastilling	C440.00	C40.00	ድራ	Enher:		
Knox	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
	11	F 1 0 (1100 to 000)	DE=0 :	00.00					
La Salle	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00			<del>  </del>		
La Salle	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
La Salle	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
La Salle	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
La Salle	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•

indicates plan do	oes not offer Part D drug coverage.								1
				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
La Salle	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
La Salle	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
La Salle	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	•
								Brands	
La Salle	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	•
								Brands	
La Salle	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
La Salle	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
La Salle	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
La Salle	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
La Salle	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
La Salle	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
La Salle	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Lake	Aetna Medicare	Aetna Medicare Open Standard Plan (H5736-007)	PFFS	\$103.00	\$27.00	\$0	Enhanced	Generics	•
Lake	Aetna Medicare	Aetna Medicare Open Premier Plan (H5736-008)	PFFS	\$163.00	\$61.20	\$0	Enhanced	Generics	•
Lake	HealthSpring, Inc.	HealthSpring Advantage (H1415-009)	Local HMO *	\$0.00					
Lake	HealthSpring, Inc.	HealthSpring Advantage Basic (H1415-014)	Local HMO	\$0.00	\$0.00	\$265	Basic		
Lake	HealthSpring, Inc.	HealthSpring Advantage PremieRx (H1415-004)	Local HMO	\$16.70	\$16.70	\$0	Enhanced	Generics	•
Lake	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Lake	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Lake	Humana Insurance Company	HumanaChoicePPO PPO H1418-002 (H1418-002)	Local PPO	\$99.00	\$25.70	\$0	Enhanced		•
Lake	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Lake	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Lake	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Lake	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Lake	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Lake	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Lake	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Lake	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Lake	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Lake	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Lake	United HealthCare Insurance Company	Erickson Advantage Signature without Drugs (H3435-002)	Demo *	\$90.00					
Lake	United HealthCare Insurance Company	Erickson Advantage Signature with Drugs (H3435-001)	Demo	\$126.00	\$18.80	\$0	Enhanced		•
Lawrence	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Lawrence	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Lawrence	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Lawrence	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Lawrence	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Lawrence	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Lawrence	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Lawrence	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Lawrence	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Lawrence	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Lawrence	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Lee	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Lee	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Lee	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Lee	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Lee	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Lee	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Lee	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•

				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
ounty	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payment
ee	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	• payment
		( 11 11 )				, ,		Brands	
ee	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	•
	0: 0 #	0: 0 :: (111110 000)	DEE0 +	004.40				Brands	
ee	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
e	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
e	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
e	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
e	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
ee	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
e	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
ee	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
vingston	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
vingston	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
ringston	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
vingston	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
vingston	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
vingston	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
vingston	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
vingston	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
vingston	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	\$0.00	φυ	Ellianceu		•
		Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		
vingston	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)							•
vingston	Humana Insurance Company		Regional PPO Local HMO *	\$71.00	\$26.10	\$0	Basic		•
vingston	OSF Care Advantage	OSF Care Advantage (H1468-005)		\$54.00	<b>D</b> 40 40	•	<u> </u>		
vingston	OSF Care Advantage	OSF Care Advantage Basic Rx (H1468-007)	Local HMO	\$94.00	\$40.10	\$0	Basic	Consider and	•
ringston	OSF Care Advantage	OSF Care Advantage Rx (H1468-004)	Local HMO	\$129.00	\$75.30	\$0	Enhanced	Generics and Brands	•
vingston	OSF Care Advantage	OSF Care Advantage Rx Plus (H1468-006)	Local HMO	\$153.00	\$98.80	\$0	Enhanced	All Formulary Drugs	•
vingston	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
vingston	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
vingston	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	•
vingston	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Brands Generics and	•
		· · ·						Brands	
vingston	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
vingston	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
/ingston	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
vingston	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
vingston	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
vingston	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
vingston	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
vingston	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
ngan	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
gan	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
gan	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
gan	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
ogan	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
· · ·	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
ngan				Ψ.50.20	ψ00.00	Ψ°		l .	
ogan ogan	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•

maioatoo pian ao	es not offer Part D drug coverage.			NA Ala la -					066
				Monthly					Offers
				Consolidated	Monthly	A	Device	Tumo of	Variable
			Towns of Markinson	Premium	Monthly	Annual	Drug	Type of	Drug
•	0 1 11 11	DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	<del>                                     </del>
Logan	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Logan	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	<b>#</b> 00.00				
Logan	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Logan	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Logan	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Logan	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	<b>#</b> 00 <b>7</b> 0	<b>#</b> 400			1
Logan	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Logan	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Logan	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00	004.00		- ·		
Logan	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic	Commission	•
Logan	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Logan	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					<b>.</b>
Logan	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					<u> </u>
Logan	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Logan	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					<b>.</b>
Logan	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Macon	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					<u> </u>
Macon	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Macon	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					ļ
Macon	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Macon	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Macon	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					ļ
Macon	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Macon	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Macon	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Macon	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Macon	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Macon	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Macoupin	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Macoupin	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Macoupin	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Macoupin	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Macoupin	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Macoupin	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Macoupin	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Macoupin	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Macoupin	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Macoupin	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Macoupin	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Macoupin	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Macoupin	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Macoupin	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Macoupin	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Macoupin	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Macoupin	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Macoupin	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Macoupin	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Macoupin	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	+	7.			<b>†</b>
Madison	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00			İ		1
Madison	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00			1		†
Madison	Group Health Plan, Inc.	Advantra Option 1 (H2663-006)	Local HMO	\$0.00	\$0.00	\$0	Basic		
Madison	Group Health Plan, Inc.	Gold Advantage Option 1 (H2663-005)	Local HMO	\$0.00	\$0.00	\$0	Basic		-

Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Control   Cont	indicates plan do	pes not offer Part D drug coverage.			Manual I.					055
Total   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Paper   Pape					Monthly					Offers
Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part						Manuallala	0	Down	T 6	
County   Comparison Review   Plan Review   Plan Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   Plan   P				Tune of Medicare		,			J.	3
Admission   Group Feesth PRus, Inc.   Gold Advantage Coption 2 (1968) 0.077   Local PMID   \$50.00   \$7.00   \$50.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00   \$1.00	Country	Organization Name	Dian Nama		•	3				
Advantor   Group Feeth Piet   Inc.   Advantar Option   1/2693-002    Regional   1/2693-002    Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption   Seption									Offered in the Gap	
Marieson   Humann Insurance Company   Humana Chicace PPO PPO R8569 023 (185866-023)   Regional PPO   \$0.00			0 1 1		*				Conorino	
Adelson   Humana Insurance Company   Humana Gold Choice PFFS H1984-200   FFFS   \$89,00   \$75.40   \$9   Enhanced   • Adelson   Humana Environce Company   Humana Gold Choice PFFS   H1984-200   H595-85   \$89,00   \$26.80   \$9   Enhanced   • Adelson   Humana Environce Company   Humana Gold Choice PFFS   H1984-200   H595-85   \$90,00   \$26.80   \$9   Enhanced   • Adelson   Humana Environce Company   Humana Gold Choice PFFS   H1984-200   H595-85   \$90,00   \$26.80   \$9   Enhanced   • Adelson   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-85   H595-						\$17.20	\$0	Ennanced	Generics	•
Medistron   Humans Insurance Company   Humans Gold Choice PFFS H18040-2000   PFFS   \$38.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.50.00   \$0.5						<b>COE 40</b>	<b></b>	Fahanaad		
Adelston   Humann Insurance Company			,		· · · · · · · · · · · · · · · · · · ·					
Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   Metrop   M										
Medison   Mercy Health Plans, Inc.   Perembrillus - Illinois (PESE-005)   Local HMO   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00			,		· · · · · · · · · · · · · · · · · · ·	\$∠6.10	\$0	Basic		•
Medicancomplete (PESS-0-04)   Local HMO   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0						<b>CO OO</b>	ΦO	Fahanaad		
MedicaneComplete Securethorizones   MedicaneComplete Pasemani (P1864-020)   Local HMO   50.00   50.00   50.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00   1.00										
Medican						\$0.00	\$0	Ennanced		•
Medison   SecureHorizone   MedisoreComplete Plus Plan 2 (H2884-022)   Local HMO*   \$0.000						<b>CO.OO</b>	<b>C</b> O	Fahanaad		
Addision   SocurePrintizons   MedicareComplete Choice (14597-001)   Local PPO   \$30,00   \$9.90   \$0   Enhanced   • Addision   Sierra Optima (14449-003)   PFFS   \$30,00						\$0.00	Φ0	Ennanced		•
Medison   Securativo (						<b>C</b> C 00	<b>C</b> O	Fahanaad		
Medison   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera Optima   Siera   Optima   Siera   Si						\$6.90	Φ0	Ennanced		•
Medison   Sierra Optima   Sierra Optima Plus (H4449-003)   PFFS   \$149.20								-		
Addison   Stefring Life Insurance Company   Stefring Option I (H5006-011)   PFFS   \$8.20   \$28.70   \$28.70   \$28.70   \$28.70   \$100   Enhanced   • Addison   Today's Option										
Addison   Sterling Life Insurance Company   Sterling Option II (H5006-010)   PFFS   \$22.70   \$28.70   \$100   Enhanced   • Addison   Today's Option   Today's			1 /					-		
Madison   Today's Option   Today's Opt						<b>#00.70</b>	<b>#</b> 400	Fahanad		
Addison   Today's Option   Today's Opt		<u> </u>				\$28.70	\$100	Ennanced		•
Addison   Today's Option   Today's Option   Today's Option Plane Plus (19421-042)   PFFS   \$44.00   \$31.90   \$0.   Basic   Madison   Today's Option Plus (19421-043)   PFFS   \$80.00   \$44.90   \$0.   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced   Enhanced										
Madison		, ,				<b>DO1 00</b>	•	<u> </u>		
Madison   UniCare   Save Well - Plan I (H7289-001)   MSA									Camadaa	
Madison   Unicare Life & Health Ins. Company   SecurityChoice Dissic (H9640-001)   PFFS   \$0.00   St.						\$44.90	\$0	Ennanced	Generics	•
Madison   Unicare Life & Health Ins. Company   SecurifyChoice Plus (H0540-020)   PFFS   \$11.00   \$0   Enhanced   Madison   Unicare Life & Health Ins. Company   SecurifyChoice Enhanced (H0540-010)   PFFS   \$55.00   \$28.70   \$0   Enhanced   Melicare   Concert (H4577-031)   PFFS   \$55.00   \$28.70   \$0   Enhanced   Melicare   Due (H4577-031)   PFFS   \$55.00   \$28.70   \$0   Enhanced   Melicare   Due (H4577-031)   PFFS   \$50.00   \$38.20   \$0   Enhanced   Melicare   Concert (H4577-031)   PFFS   \$81.00   \$38.20   \$0   Enhanced   Melicare   Summit (H4577-071)   PFFS   \$81.00   \$38.20   \$0   Enhanced   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Melicare   Meli			,							
Madison   Unicare Life & Health Ins. Company   SecurityChoice Enhanced (H0540-010)   PFFS   \$25.00			, , ,			<b>01100</b>	•			
Madison   Unicare Life & Health Ins. Company   SecurityChoice Enhanced Plus (H0540-032)   PFFS   \$56.00   \$28.70   \$0   Enhanced Genetics						\$11.00	\$0	Enhanced		•
Medison   WellCare						<b>#</b> 00 <b>7</b> 0	•		Commission	
Medicare   Concert (H4577-014)						\$28.70	\$0	Enhanced	Generics	•
Medican   WellCare   Surmit (H4677-010)   PFFS   \$211.00   \$50.10   \$0   Enhanced   • Marion   Humana Insurance Company   HumanaChoicePPO PPO R5826-023 (R5826-023)   Regional PPO   \$0.00   \$0   Marion   Humana Insurance Company   HumanaChoicePPO PPO R5826-009   Regional PPO   \$71.00   \$26.10   \$0   Basic   • Marion   Humana Insurance Company   Humana Gold Choice PFFS H1804-192 (H1804-125)   PFFS   \$199.00   \$22.90   \$0   Enhanced   • Marion   Humana Insurance Company   Humana Gold Choice PFFS H1804-198 (H1804-195)   PFFS   \$199.00   \$22.90   \$0   Enhanced   • Marion   Sierra Optima   Sierra Optima (H4449-007)   PFFS   \$128.00   \$22.90   \$20.00   \$22.90   \$0   Enhanced   • Marion   Sierra Optima   Sierra Optima (H4449-007)   PFFS   \$128.20   S1804-198 (H1804-198						<b>#</b> 00.00	•			
Humana Insurance Company			1							•
Humana Insurance Company						\$50.10	\$0	Enhanced		•
Humana Insurance Company							-			
Humana Insurance Company										
Marion   Sierra Optima   Sierra Optima   Sierra Optima (H4449-007)   PFFS   \$218.20		1 /								
Marion   Sterling Life Insurance Company   Sterling Option II (H5006-010)   PFFS   \$28.70   \$100   Enhanced   •						\$24.30	\$0	Enhanced		•
Marion   Today's Option   Today's Options Value (H5421-032)   PFFS   \$48.00						<b>#00.70</b>	<b>#</b> 400	Fahanad		
Marion   Today's Option   Today's Options Premier (H5421-034)   PFFS * \$72.00						\$28.70	\$100	Ennanced		•
Marion   Today's Option   Today's Options Value Plus (H5421-040)   PFFS   \$80.00   \$31.90   \$0   Basic   • Marion   Today's Option   Today's Options Premier Plus (H5421-041)   PFFS   \$117.00   \$44.90   \$0   Enhanced   Generics   • Marion   UniCare   Save Well - Plant II (H7289-002)   MSA * \$0.00   MSA * \$0.00								-		
Marion Today's Option Today's Options Premier Plus (H5421-041) PFFS \$117.00 \$44.90 \$0 Enhanced Generics  Alarion UniCare Save Well - Plan II (H7289-002) MSA * \$0.00 MSA * \$0.00 Marshall Advantra® Freedom Freedom (H0846-005) PFFS * \$0.00 Marshall Advantra® Freedom Freedom (H0846-004) PFFS * \$98.00 Marshall Health Alliance Medical Plans Health Alliance Medicare PPO30 (H1417-003) Local PPO * \$51.00 Marshall Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx (H1417-004) Local PPO \$88.20 \$30.30 \$0 Basic Marshall Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics  Alarshall Health Alliance Medical Plans Health Alliance Medicare PPO10 (H1417-001) Local PPO \$138.20 \$30.30 \$0 Basic Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx (H1417-002) Local PPO \$138.20 \$30.30 \$0 Basic Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx (H1417-002) Local PPO \$138.20 \$30.30 \$0 Basic Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx (H1417-005) Local PPO \$138.20 \$30.30 \$0 Basic Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx Plus (H1417-005) Local PPO \$147.10 \$39.20 \$0 Enhanced Generics Marshall Humana Insurance Company Humana Gold Choice PFFS H1804-137 (H1804-137) PFFS \$0.00 \$0.00 \$0 Enhanced Marshall Humana Insurance Company Humana ChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00 \$0.00 \$0 Enhanced Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00 \$0.00 \$0 Enhanced Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00 \$0.00 \$0 Enhanced Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00 \$0.00 \$0 Enhanced Marshall HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00 \$0.00 \$0.00 \$0 Enhanced Marshall HumanaChoicePPO PPO R5826-023 (R5826-023) R6920-023 (R5826-023) R6920-023 (R5826-023) R6920-023 (R5826-023)						<b>#04.00</b>	<b>#</b> 0	D		
Marion         UniCare         Save Well - Plan II (H7289-002)         MSA *         \$0.00           Marshall         Advantra® Freedom         Freedom 2 (H0846-005)         PFFS *         \$0.00           Marshall         Advantra® Freedom         Freedom 1 (H0846-004)         PFFS *         \$98.00           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO30 (H1417-003)         Local PPO *         \$51.00           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO30 Rx (H1417-004)         Local PPO \$88.20         \$30.30         \$0         Basic           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO30 Rx Plus (H1417-006)         Local PPO \$97.10         \$39.20         \$0         Enhanced         Generics           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO10 (H1417-001)         Local PPO \$97.10         \$39.20         \$0         Enhanced         Generics         •           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO10 Rx (H1417-002)         Local PPO \$138.20         \$30.30         \$0         Basic         •           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO10 Rx Plus (H1417-005)         Local PPO \$138.20         \$30.30 <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>Constina</td><td></td></td<>									Constina	
Marshall         Advantra® Freedom         Freedom 2 (H0846-005)         PFFS *         \$0.00           Marshall         Advantra® Freedom         Freedom 1 (H0846-004)         PFFS *         \$98.00           Marshall         Health Alliance Medical Plans         Health Alliance Medical Plans         Local PPO *         \$51.00           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO30 Rx (H1417-004)         Local PPO *         \$88.20         \$30.30         \$0         Basic           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO30 Rx Plus (H1417-006)         Local PPO *         \$97.10         \$39.20         \$0         Enhanced         Generics           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO10 (H1417-001)         Local PPO *         \$101.00           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO10 Rx (H1417-002)         Local PPO *         \$138.20         \$30.30         \$0         Basic           Marshall         Health Alliance Medical Plans         Health Alliance Medicare PPO10 Rx (H1417-005)         Local PPO *         \$147.10         \$39.20         \$0         Enhanced         Generics           Marshall         Humana Insurance Company         Humana Gold Choice PFFS H1804-137 (H1804-137)						\$44.90	\$0	∟nnanced	Generics	•
Marshall Advantra® Freedom Freedom 1 (H0846-004) PFFS * \$98.00 Aarshall Health Alliance Medical Plans Health Alliance Medicare PPO30 (H1417-003) Local PPO * \$51.00 Aarshall Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx (H1417-004) Local PPO \$88.20 \$30.30 \$0 Basic • Marshall Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics • Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 (H1417-001) Local PPO * \$101.00 Aarshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx (H1417-002) Local PPO \$138.20 \$30.30 \$0 Basic • Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx Plus (H1417-005) Local PPO \$147.10 \$39.20 \$0 Enhanced Generics • Marshall Humana Insurance Company Humana Gold Choice PFFS H1804-137 (H1804-137) PFFS \$0.00 \$0.00 \$0 Enhanced • Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00					· · · · · · · · · · · · · · · · · · ·			<del>                                     </del>		
Marshall Health Alliance Medical Plans Health Alliance Medicare PPO30 (H1417-003) Local PPO * \$51.00  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx (H1417-004) Local PPO \$88.20 \$30.30 \$0 Basic •  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics •  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 (H1417-001) Local PPO * \$101.00  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx (H1417-002) Local PPO \$138.20 \$30.30 \$0 Basic •  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx Plus (H1417-005) Local PPO \$138.20 \$30.30 \$0 Basic •  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx Plus (H1417-005) Local PPO \$147.10 \$39.20 \$0 Enhanced Generics •  Marshall Humana Insurance Company Humana Gold Choice PFFS H1804-137 (H1804-137) PFFS \$0.00 \$0.00 \$0 Enhanced •  Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00							-	<del>                                     </del>		
Marshall Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx (H1417-004) Local PPO \$88.20 \$30.30 \$0 Basic • Marshall Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics •  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 (H1417-001) Local PPO \$101.00								<del>                                     </del>		
Marshall Health Alliance Medical Plans Health Alliance Medicare PPO30 Rx Plus (H1417-006) Local PPO \$97.10 \$39.20 \$0 Enhanced Generics  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 (H1417-001) Local PPO \$101.00  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx (H1417-002) Local PPO \$138.20 \$30.30 \$0 Basic  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx Plus (H1417-005) Local PPO \$147.10 \$39.20 \$0 Enhanced Generics  Marshall Humana Insurance Company Humana Gold Choice PFFS H1804-137 (H1804-137) PFFS \$0.00 \$0.00 \$0 Enhanced  Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00						#00.0C	<b>*</b>	D		
Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 (H1417-001) Local PPO * \$101.00 Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx (H1417-002) Local PPO \$138.20 \$30.30 \$0 Basic Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx Plus (H1417-005) Local PPO \$147.10 \$39.20 \$0 Enhanced Generics Marshall Humana Insurance Company Humana Gold Choice PFFS H1804-137 (H1804-137) PFFS \$0.00 \$0.00 \$0 Enhanced Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00									Coni	
Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx (H1417-002) Local PPO \$138.20 \$30.30 \$0 Basic •  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx Plus (H1417-005) Local PPO \$147.10 \$39.20 \$0 Enhanced Generics •  Marshall Humana Insurance Company Humana Gold Choice PFFS H1804-137 (H1804-137) PFFS \$0.00 \$0.00 \$0 Enhanced •  Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.0	Marshall	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx (H1417-002) Local PPO \$138.20 \$30.30 \$0 Basic •  Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx Plus (H1417-005) Local PPO \$147.10 \$39.20 \$0 Enhanced Generics •  Marshall Humana Insurance Company Humana Gold Choice PFFS H1804-137 (H1804-137) PFFS \$0.00 \$0.00 \$0 Enhanced •  Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0 Enhanced \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.0	Marshall	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Marshall Health Alliance Medical Plans Health Alliance Medicare PPO10 Rx Plus (H1417-005) Local PPO \$147.10 \$39.20 \$0 Enhanced Generics  Marshall Humana Insurance Company Humana Gold Choice PFFS H1804-137 (H1804-137) PFFS \$0.00 \$0.00 \$0 Enhanced •  Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00 \$0.00 \$0 Enhanced •	Marshall		1			\$30.30	\$0	Basic		•
Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00	Marshall		,	Local PPO					Generics	•
Marshall Humana Insurance Company HumanaChoicePPO PPO R5826-023 (R5826-023) Regional PPO * \$0.00	Marshall	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced	+	
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	Marshall	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		

	pes not offer Part D drug coverage.			Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Generics and Brands All Formulary Drugs Generics and Brands Generics and Brands Generics and Brands Generics and Brands Generics Generics Generics Generics	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit		Co-
0	Owner-landing Name	Dies News			3				
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Marshall	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Marshall	OSF Care Advantage	OSF Care Advantage (H1468-005)	Local HMO *	\$54.00					
Marshall	OSF Care Advantage	OSF Care Advantage Basic Rx (H1468-007)	Local HMO	\$94.00	\$40.10	\$0	Basic		•
Marshall	OSF Care Advantage	OSF Care Advantage Rx (H1468-004)	Local HMO	\$129.00	\$75.30	\$0	Enhanced		•
Marshall	OSF Care Advantage	OSF Care Advantage Rx Plus (H1468-006)	Local HMO	\$153.00	\$98.80	\$0	Enhanced	All Formulary Drugs	•
Marshall	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Marshall	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Marshall	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	
marorian	00. 00.0 . 10.000	001 0010 1 1010 100 1 th (1.100 <u>1</u> 00 1)	20000	<b>V.20.00</b>	ψ.σσ	Ψ.	2		_
Marshall	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	•
Marshall	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Marshall	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00			İ		
Marshall	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Marshall	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Marshall	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Marshall	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Marshall	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00	Ψ20.70	\$100	Lillanceu		•
Marshall	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00					
Marshall		Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic		
	Today's Option	Today's Options Premier Plus (H5421-044)	PFFS		\$44.90	\$0		Canarias	
Marshall	Today's Option	, , , , , , , , , , , , , , , , , , , ,		\$45.00	\$44.90	20	Enhanced	Generics	•
Marshall	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Marshall	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Marshall	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Marshall	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Marshall	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Marshall	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Marshall	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Marshall	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Marshall	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Mason	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Mason	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		
Mason	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Mason	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Mason	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Mason	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Mason	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Mason	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Mason	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Mason	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Mason	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	7_3	7~	_ 30.0		
Mason	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00		t	1		
Mason	Sterling Life Insurance Company	Sterling Option II (H5006-011)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Mason	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00	Ψ20.10	ψισσ	Limanceu		
VIGOUII	Froday & Option	Froday 3 Options value (110421-002)	1110	Ψ+0.00	1	1	I	1	

maioatoo pian aoc	s not offer Part D drug coverage.			Manadala					066
				Monthly					Offers
				Consolidated	Monthly	Ammunal	Device	Time of	Variable
			Town of Modices	Premium	Monthly	Annual	Drug	Type of	Drug
0	OIti N	Diam Name	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage Offered in the Gap	Co-
County	Organization Name	Plan Name	Health Plan PFFS	Part C + D) \$80.00	Premium \$31.90	Deductible \$0	Type Basic	Offered in the Gap	
Mason	Today's Option	Today's Options Value Plus (H5421-040)						Conorino	•
Mason	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS MSA *	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Mason	UniCare	Save Well - Plan III (H7289-003)	PFFS *	\$0.00 \$0.00					<u> </u>
Massac	Advantra® Freedom	Freedom 3 (H0846-006)		· ·	\$0.00	<b>C</b> O	Falsassa		
Massac	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137) HumanaChoicePPO PPO R5826-023 (R5826-023)	PFFS Regional PPO *	\$0.00 \$0.00	\$0.00	\$0	Enhanced		•
Massac	Humana Insurance Company	,	PFFS		<b>#20.00</b>	ΦO	Fahanaad		
Massac Massac	Humana Insurance Company Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199) HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$20.00 \$71.00	\$20.00 \$26.10	\$0 \$0	Enhanced Basic		ļ
			PFFS *	\$81.40	\$20.10	\$0	Basic		•
Massac	Sierra Optima	Sierra Optima (H4449-006)	PFFS *						
Massac	Sierra Optima	Sierra Optima Plus (H4449-003)		\$149.20	<b>#00.70</b>	£400	Fahanaad		<del> </del>
Massac	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS *	\$28.70	\$28.70	\$100	Enhanced		•
Massac	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Massac	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00	<b>CO4.00</b>	<b>#</b> 0	D		
Massac	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic	Commission	•
Massac	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Massac	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					ļ
McDonough	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					<b>_</b>
McDonough	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					<b></b>
McDonough	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					<b>_</b>
McDonough	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
McDonough	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
McDonough	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
McDonough	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
McDonough	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
McDonough	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
McDonough	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	40.00	**			
McDonough	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
McDonough	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
McDonough	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00	<b>V</b>	**			
McDonough	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
McDonough	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
McDonough	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
McDonough	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
McDonough	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
McDonough	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20			1	1	
McDonough	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced	1	
McDonough	Today's Option	Today's Options Value (H5421-035)	PFFS*	\$12.00	<del>+</del> -30	Ţ.00			
McDonough	Today's Option	Today's Options Premier (H5421-037)	PFFS*	\$35.00					
McDonough	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		
McDonough	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
McDonough	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	7	70		22.10.100	
McDonough	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
McDonough	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced	1	•
McDonough	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	ψσσ	<b>~</b> ~			
McDonough	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
McHenry	Aetna Medicare	Aetna Medicare Open Standard Plan (H5736-007)	PFFS	\$103.00	\$27.00	\$0	Enhanced	Generics	-
McHenry	Aetna Medicare	Aetna Medicare Open Premier Plan (H5736-008)	PFFS	\$163.00	\$61.20	\$0	Enhanced	Generics	•
McHenry	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	ψ01. <u>Σ</u> 0	<b>~</b> 0	anoou	55.161165	
McHenry	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic	<u> </u>	
McHenry	Humana Insurance Company	HumanaChoicePPO PPO H1418-002 (H1418-002)	Local PPO	\$99.00	\$25.70	\$0	Enhanced	<del> </del>	

" indicates plan do	pes not offer Part D drug coverage.			Manual I.					055
				Monthly					Offers
				Consolidated	Manualla I	0	Down	T	Variable
			T (14 !!	Premium	Monthly	Annual	Drug	Type of	Drug
•		DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan PFFS	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
McHenry	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)		\$109.00	\$22.90	\$0	Enhanced		•
McHenry	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
McHenry	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
McHenry	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	<b>#00.70</b>	<b>#</b> 400	Fabruard		
McHenry	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
McHenry	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
McHenry	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00	<b>CO4.00</b>	<b>C</b> O	Di-		
McHenry	Today's Option	Today's Options Value Plus (H5421-040)	PFFS PFFS	\$80.00 \$117.00	\$31.90 \$44.90	\$0 \$0	Basic	Canarias	•
McHenry	Today's Option	Today's Options Premier Plus (H5421-041)  Save Well - Plan III (H7289-003)	MSA *	\$0.00	\$44.90	\$0	Enhanced	Generics	•
McHenry	UniCare								
McLean	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS * Local HMO *	\$0.00					
McLean	Health Alliance Medical Plans	Health Alliance Medicare HMO30 (H1463-002)		\$51.00					
McLean McLean	Health Alliance Medical Plans Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003) Health Alliance Medicare HMO30 Rx (H1463-004)	Local PPO * Local HMO	\$51.00 \$88.20	\$30.30	\$0	Basic		
		\ /	Local PPO						•
McLean McLean	Health Alliance Medical Plans Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004) Health Alliance Medicare HMO20 (H1463-001)	Local HMO *	\$88.20 \$91.00	\$30.30	\$0	Basic		•
	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx Plus (H1463-006)		\$97.00	£20.20	\$0	Fahanaad	Generics	•
McLean	Health Alliance Medical Plans	Health Alliance Medicare HMO30 RX Plus (H1463-006)	Local HMO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
McLean	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
McLean	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
McLean	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx (H1463-003)	Local HMO	\$128.20	\$30.30	\$0	Basic		•
McLean	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx Plus (H1463-005)	Local HMO	\$137.10	\$39.20	\$0	Enhanced	Generics	•
Mal a a a	Health Alliance Medical Plans	Haalib Allianaa Madiaaa DDO40 Do (H4447 000)	L I DDO	<b>#</b> 400.00	<b>#</b> 00.00	<b>.</b>	D		
McLean		Health Alliance Medicare PPO10 Rx (H1417-002) Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$138.20 \$447.40	\$30.30	\$0 \$0	Basic	Conorios	•
McLean	Health Alliance Medical Plans	Health Alliance Medicare PPO10 RX Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
McLean	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
McLean	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
McLean	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
McLean	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
McLean	OSF Care Advantage	OSF Care Advantage (H1468-005)	Local HMO *	\$54.00					
McLean	OSF Care Advantage	OSF Care Advantage Basic Rx (H1468-007)	Local HMO	\$94.00	\$40.10	\$0	Basic		•
McLean	OSF Care Advantage	OSF Care Advantage Rx (H1468-004)	Local HMO	\$129.00	\$75.30	\$0	Enhanced	Generics and	•
McLean	OSF Care Advantage	OSF Care Advantage Rx Plus (H1468-006)	Local HMO	\$153.00	\$98.80	\$0	Enhanced	Brands All Formulary Drugs	•
	0050 5 (	0050 0 0 ( ) (()							
McLean	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00	000.50	•	Б.		
McLean	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic	Commission	•
McLean	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
McLean	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
McLean	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00		İ			
McLean	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
McLean	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
McLean	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	1	1			
McLean	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
McLean	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00		i i			
McLean	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00	1	1			
McLean	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
McLean	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
McLean	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Menard	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					

				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of Extra Coverage Offered in the Gap p  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics  d Generics and Brands  d Generics and Brands  d Generics and Brands	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Menard	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00			,,		
Menard	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Menard	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	
		(			400				
Menard	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Menard	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Menard	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
		,		,	,				
Menard	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Menard	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Menard	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Menard	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Menard	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Menard	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Menard	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Menard	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Menard	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Menard	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Menard	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Menard	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Menard	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Menard	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Menard	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Menard	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Menard	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Mercer	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Mercer	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Mercer	Humana Insurance Company	Humana Gold Choice PFFS H1804-138 (H1804-138)	PFFS	\$39.00	\$25.40	\$0	Enhanced		•
Mercer	Humana Insurance Company	Humana Gold Choice PFFS H1804-200 (H1804-200)	PFFS	\$59.00	\$26.40	\$0	Enhanced		•
Mercer	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Mercer	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Mercer	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Mercer	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	•
								Brands	
Mercer	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	•
								Brands	
Mercer	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Mercer	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					<u> </u>
Mercer	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Mercer	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Mercer	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Mercer	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Mercer	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Mercer	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Mercer	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Mercer	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Mercer	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Mercer	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Mercer	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Mercer	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Mercer	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Mercer	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
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indicates plan do	es not offer Part D drug coverage.			Manadali					066
				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
		a	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	T
Mercer	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Mercer	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Monroe	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Monroe	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Monroe	Essence Inc.	Essence Standard Plan (H2610-005)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Monroe	Essence Inc.	Essence Enhanced (H2610-006)	Local HMO	\$39.00	\$39.00	\$0	Enhanced	All Formulary Drugs	•
Monroe	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Monroe	Humana Insurance Company	Humana Gold Choice PFFS H1804-138 (H1804-138)	PFFS	\$39.00	\$25.40	\$0	Enhanced		•
Monroe	Humana Insurance Company	Humana Gold Choice PFFS H1804-200 (H1804-200)	PFFS	\$59.00	\$26.40	\$0	Enhanced		•
Monroe	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Monroe	Mercy Health Plans, Inc.	PremierPlus - Illinois (no RX) (H2667-014)	Local HMO *	\$25.00					
Monroe	Mercy Health Plans, Inc.	PremierPlus - Illinois (H2667-005)	Local HMO	\$49.00	\$0.00	\$0	Enhanced		•
Monroe	SecureHorizons	MedicareComplete (H2654-004)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Monroe	SecureHorizons	MedicareComplete Essential (H2654-020)	Local HMO *	\$0.00					
Monroe	SecureHorizons	MedicareComplete Plus Plan 1 (H2654-013)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Monroe	SecureHorizons	MedicareComplete Plus Plan 2 (H2654-022)	Local HMO *	\$0.00	ψ0.00	Ψ.	2		
Monroe	SecureHorizons	MedicareComplete Choice (H5507-001)	Local PPO	\$30.00	\$6.90	\$0	Enhanced		•
Monroe	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00	Ψ0.50	ΨΟ	Liliancea		
Monroe	Sierra Optima	Sierra Optima (H4449-006)	PFFS*	\$81.40					
Monroe	Sierra Optima	Sierra Optima (14449-000)	PFFS*	\$149.20					
Monroe	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
	Sterling Life Insurance Company	Sterling Option II (H5006-011)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Monroe Monroe	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$28.70	\$28.70	\$100	Ennanced		•
	, ,		PFFS *						
Monroe	Today's Option	Today's Options Premier (H5421-037)	PFFS	\$35.00 \$44.00	<b>CO4.00</b>	\$0	Deele		
Monroe	Today's Option	Today's Options Value Plus (H5421-042)			\$31.90		Basic	0 '	•
Monroe	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Monroe	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Monroe	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Monroe	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Monroe	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Monroe	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Montgomery	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Montgomery	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Montgomery	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Montgomery	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Montgomery	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Montgomery	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Montgomery	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Montgomery	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00		1			
Montgomery	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Montgomery	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Montgomery	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	7-5	7~			<del>-</del> -
Montgomery	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	t	1			t
Montgomery	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Montgomery	Today's Option	Today's Options Value (H5421-032)	PFFS*	\$48.00	Ψ20.10	Ψ.00			<b>-</b>
Montgomery	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00	<del>                                     </del>	<del> </del>			<del>                                     </del>
Montgomery	Today's Option	Today's Options Premier (H5421-034)  Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		<del>                                     </del>
		Today's Options Value Plus (H5421-040) Today's Options Premier Plus (H5421-041)	PFFS	\$80.00 \$117.00	\$44.90	\$0 \$0	Enhanced	Generics	•
Montgomery	Today's Option				\$44.90	ΦU	Ennanced	Genencs	•
Montgomery	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00			l		<u> </u>

	loes not offer Part D drug coverage.			Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Morgan	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00	Premium	Deductible	Type	Offered III the Gap	payments
Morgan	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (R1417-003)	Local PPO	\$88.20	\$30.30	\$0	Basic		
Morgan Morgan	Health Alliance Medical Plans Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)  Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$30.30	\$0	Enhanced	Generics	•
worgan	Health Alliance Medical Plans	Tealth Alliance Medicale PPO30 Rx Plus (H1417-006)	Local PPO	φ97.10	φ39.20	Φ0	Ennanced	Generics	•
Morgan	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Morgan	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Morgan	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Morgan	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Morgan	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Morgan	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Morgan	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Morgan	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Morgan	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Morgan	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Morgan	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Morgan	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Morgan	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Morgan	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Morgan	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Morgan	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	•	•			
Moultrie	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare HMO30 (H1463-002)	Local HMO *	\$51.00					
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx (H1463-004)	Local HMO	\$88.20	\$30.30	\$0	Basic		
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		-
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare HMO20 (H1463-001)	Local HMO *	\$91.00	ψ50.50	ΨΟ	Dasic		
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx Plus (H1463-006)	Local HMO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	
Wouldie	riealth Alliance Medical Flans	Treatiti Alliance Medicare PPO30 RX Plus (111417-000)	Local FFO	φ97.10	φ39.20	Φ0	Ellianceu	Generics	•
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx (H1463-003)	Local HMO	\$128.20	\$30.30	\$0	Basic		•
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx Plus (H1463-005)	Local HMO	\$137.10	\$39.20	\$0	Enhanced	Generics	•
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		
Moultrie	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Moultrie	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		
Moultrie	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	ψ0.00	ΨΟ			
Moultrie	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Moultrie	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		<u> </u>
Moultrie	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00	Ψ20.10	ΨΟ	Dasio		<u> </u>
Moultrie	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Moultrie	Sierra Optima Sierra Optima	Sierra Optima (14449-003)	PFFS *	\$149.20					
Moultrie	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$149.20	\$28.70	\$100	Enhanced		
Moultrie		Today's Options Value (H5421-035)	PFFS *	\$28.70	φ∠ö./U	φ100	Ennanced		<u> </u>
	Today's Option	Today's Options Value (H5421-035)  Today's Options Premier (H5421-037)	PFFS *	\$12.00			1		<del>                                     </del>
Moultrie	Today's Option	, , , , ,			<b>#04.00</b>	<b>C</b> O	Di-		1
Moultrie	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0 \$0	Basic	Companies	•
Moultrie	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Moultrie	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00			1		
Moultrie	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00			<del>  </del>		
Moultrie	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced	1	•

	bes not offer Part D drug coverage.			Monthly					Offers
				Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Moultrie	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Moultrie	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Ogle	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Ogle	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Ogle	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Ogle	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Ogle	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Ogle	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Ogle	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Ogle	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Ogle	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	•
- 9		(		V.=5.00	4	**		Brands	
Ogle	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
Ogle	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced	Bidilds	•
Ogle	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Ogle	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Ogle	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Ogle	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Ogle Signature	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Ogle	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	Ψ20.70	Ψίου	Emilanoca		
Ogle Sgle	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Ogle Ogle	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Ogle Ogle	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	
Ogle Ogle	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	φ44.90	ΦΟ	Ellianceu	Generics	•
Ogle	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Ogle Ogle	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		
		/ //	PFFS *	\$25.00	\$11.00	\$0	Ennanced		•
Ogle	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)			<b>#</b> 00 <b>7</b> 0	•		Camania	
Ogle	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Ogle	WellCare	Freedom (H4577-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Ogle	WellCare	Concert (H4577-013)	PFFS	\$41.00	\$1.90	\$0	Enhanced		•
Ogle	WellCare	Summit (H4577-008)	PFFS	\$161.00	\$31.30	\$0	Enhanced		•
Peoria	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Peoria	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Peoria	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Peoria	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Peoria	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Peoria	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Peoria	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Peoria	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Peoria	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Peoria	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Peoria	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Peoria	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Peoria	OSF Care Advantage	OSF Care Advantage (H1468-005)	Local HMO *	\$54.00					
Peoria	OSF Care Advantage	OSF Care Advantage Basic Rx (H1468-007)	Local HMO	\$94.00	\$40.10	\$0	Basic		•
Peoria	OSF Care Advantage	OSF Care Advantage Rx (H1468-004)	Local HMO	\$129.00	\$75.30	\$0	Enhanced	Generics and Brands	•
	0050 41 4	OSF Care Advantage Rx Plus (H1468-006)	Local HMO	\$153.00	\$98.80	\$0	Enhanced		•
Peoria	OSF Care Advantage	OSF Care Advantage Rx Plus (F1400-000)	Local Filvio	ψ133.00	ψ90.00	ΦΟ	Lillanceu	All Formulary Drugs	

	oes not offer Part D drug coverage.			Monthly					Offers
				Consolidated					Variable
					Manually Is a	A	D	T 6	
				Premium	Monthly	Annual	Drug	Brands d Generics and Brands d Generics d Generics d Generics d Generics d Generics d Generics d Generics d Generics	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit		Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Peoria	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Peoria	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced		•
Peoria	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	•
Peoria	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced	DIdilus	•
Peoria	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 1 (H5435-001)	PFFS *	\$0.00					
Peoria	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Peoria Peoria	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$121.20					
		Sterling Option I (H5006-011)	PFFS *	\$9.00					
Peoria	Sterling Life Insurance Company	0 1 1	PFFS		\$28.70	£400	Falsassa		
Peoria	Sterling Life Insurance Company	Sterling Option II (H5006-010)		\$28.70	\$28.70	\$100	Enhanced		•
Peoria	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00					
Peoria	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00					
Peoria	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic		•
Peoria	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	•
Peoria	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Peoria	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Peoria	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Peoria	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Peoria	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Peoria	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Peoria	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Peoria	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Peoria	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Peoria	WellCare	Freedom (H4577-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		
	WellCare	Concert (H4577-013)	PFFS	\$41.00	\$1.90	\$0	Enhanced		_
Peoria									•
Peoria	WellCare	Summit (H4577-009)	PFFS	\$181.00	\$43.10	\$0	Enhanced		•
Perry	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	<b>#</b> 00.40		Б.		
Perry	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Perry	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Perry	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Perry	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Perry	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Perry	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Perry	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Perry	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Perry	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Perry	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Piatt	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Piatt	Health Alliance Medical Plans	Health Alliance Medicare HMO30 (H1463-002)	Local HMO *	\$51.00					
Piatt	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Piatt	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx (H1463-004)	Local HMO	\$88.20	\$30.30	\$0	Basic	1	
Piatt	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic	<u> </u>	
Piatt	Health Alliance Medical Plans	Health Alliance Medicare HMO20 (H1463-001)	Local HMO *	\$91.00	φου.ου	φυ	Dasic		<b>⊢</b> •
					#20.00	r c	Fabrur '	Conorino	
Piatt	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx Plus (H1463-006)	Local HMO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Piatt	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Piatt	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00		<b>†</b>			

marcated plan at	pes not offer Part D drug coverage.			Manalalia					055
				Monthly					Offers
				Consolidated	Manualla I	0	Down	T 6	Variable
			T (14 !!	Premium	Monthly	Annual	Drug	Type of	Drug
		DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Piatt	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx (H1463-003)	Local HMO	\$128.20	\$30.30	\$0	Basic	Commission	•
Piatt	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx Plus (H1463-005)	Local HMO	\$137.10	\$39.20	\$0	Enhanced	Generics	•
Piatt	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Piatt	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Piatt	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Piatt	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Piatt	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Piatt	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Piatt	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Piatt	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Piatt	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Piatt	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Piatt	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Piatt	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Piatt	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Piatt	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Piatt	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Piatt	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Piatt	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Piatt	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Piatt	WellCare	Concert (H4577-014)	PFFS	\$81.00	\$38.20	\$0	Enhanced		•
Piatt	WellCare	Summit (H4577-009)	PFFS	\$181.00	\$43.10	\$0	Enhanced		•
Pike	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Pike	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Pike	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Pike	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Pike	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Pike	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Pike	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Pike	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Pike	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Pike	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Pike	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Pike	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Pike	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Pike	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Pike	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Pike	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Pike	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Pike	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Pike	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Pike	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Pike	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Pike	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Pike	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Pope	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00	1				
Pope	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Pope	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Pope	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00		T			
Pope	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•

	pes not offer Part D drug coverage.			Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Generics  Generics  Generics  Generics  Generics  Generics  Generics  Generics  Generics	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type		payments
Pope	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Pope	Sierra Optima	Sierra Optima (H4449-007)	PFFS*	\$218.20	* -	* -			
Pope	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Pope	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	* -				
Pope	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Pope	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Pope	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Pope	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Pulaski	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Pulaski	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	*	* -			
Pulaski	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Pulaski	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Pulaski	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40	Ψ20.10	ΨΟ	Daoio		
Pulaski	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20				<u> </u>	
Pulaski	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced	<u> </u>	
Pulaski	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00	Ψ20.70	Ψίου	Elinanoca		
Pulaski	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Pulaski	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		
Pulaski	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Pulaski	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	Ψ44.90	ΨΟ	Lilianceu	Generics	-
Pulaski	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Pulaski	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Pulaski	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	\$11.00	ΨΟ	Ellianceu		-
Pulaski	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Conorics	•
Putnam	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$56.00 \$51.00	φ20.7U	φU	Ennanceu	Genencs	•
Putnam	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (R1417-003)	Local PPO	\$88.20	\$30.30	\$0	Basic		
	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Conorine	•
Putnam	Health Alliance Medical Plans	Health Alliance Medicare PPO30 RX Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Ennanced	Generics	•
Putnam	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Putnam	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Putnam	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Putnam	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Putnam	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Putnam	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Putnam	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Putnam	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Putnam	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Putnam	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced		•
Putnam	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	•
Putnam	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40			1		
Putnam	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20			1	1	
Putnam	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced	1	
Putnam	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00	Ψ=5.70	¥.00		1	
Putnam	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00			<u> </u>		
Putnam	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic	1	
Putnam	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Putnam	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	ψ.1.00	¥0	a	55.161165	
Putnam	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Putnam	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					

				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Putnam	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced	onorou m mo oup	•
Di da a aa	United I legitheers Dies of the Diver Velley, Inc.	Madiana Complete Dive Drive (11445C 047)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		
Putnam	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HIVIO	\$113.00	\$10.80	\$0	Ennanced		•
Randolph	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Randolph	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Randolph	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Randolph	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Randolph	Mercy Health Plans, Inc.	PremierPlus - Illinois (no RX) (H2667-014)	Local HMO *	\$25.00					
Randolph	Mercy Health Plans, Inc.	PremierPlus - Illinois (H2667-005)	Local HMO	\$49.00	\$0.00	\$0	Enhanced		•
Randolph	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Randolph	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Randolph	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Randolph	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Randolph	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Randolph	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Randolph	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Randolph	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	ψσ	Ψ.	21111011000		
Richland	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Richland	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Richland	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	\$0.00	ΦΟ	Ellianceu		•
		Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	<b>#20.00</b>	\$0	Fahanaad		•
Richland	Humana Insurance Company				\$20.00		Enhanced		
Richland	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Richland	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Richland	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Richland	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Richland	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Richland	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Richland	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Richland	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Richland	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Richland	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Richland	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Richland	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Richland	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Rock Island	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Rock Island	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Rock Island	Humana Insurance Company	Humana Gold Choice PFFS H1804-138 (H1804-138)	PFFS	\$39.00	\$25.40	\$0	Enhanced		•
Rock Island	Humana Insurance Company	Humana Gold Choice PFFS H1804-200 (H1804-200)	PFFS	\$59.00	\$26.40	\$0	Enhanced		•
Rock Island	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Rock Island	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	Ψ20.10	ΨΟ	Dasic		•
Rock Island	Sterling Life Insurance Company	,	PFFS *	\$9.00		-			
		Sterling Option I (H5006-011)	PFFS		<b>#20.70</b>	£400	Fahanaad		
Rock Island	Sterling Life Insurance Company	Sterling Option II (H5006-010)		\$28.70	\$28.70	\$100	Enhanced		•
Rock Island	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Rock Island	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00	4				
Rock Island	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic	<u> </u>	•
Rock Island	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Rock Island	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Rock Island	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Rock Island	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Rock Island	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•

	es not offer Part D drug coverage.			Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Rock Island	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Saline	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS*	\$0.00					
Saline	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Saline	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Saline	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Saline	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Saline	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Saline	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Saline	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Saline	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Saline	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	Ψ20.7 0	ψ.σσ	21111011000		
Saline	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Saline	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Saline	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	<u> </u>
Saline	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	φ <del>44</del> .90	ΦΟ	Ellianceu	Genencs	<del></del>
				· · · · · · · · · · · · · · · · · · ·					
Sangamon	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Sangamon	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Sangamon	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Sangamon	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Sangamon	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Sangamon	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Sangamon	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Sangamon	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Sangamon	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Sangamon	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Sangamon	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Sangamon	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Sangamon	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Sangamon	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Sangamon	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Sangamon	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Sangamon	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	*				
Sangamon	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Sangamon	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Sangamon	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	
Sangamon	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	Ψ11.00	ΨΟ	Emilanoca	Contonios	— <u> </u>
Schuyler	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					<del></del>
Schuyler	Advanta® Freedom Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					<del> </del>
Schuyler			Local PPO		<b>#20.20</b>	\$0	Dania		<del> </del>
Schuyler	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)		\$88.20	\$30.30	7.	Basic	Comordos	•
Schuyler	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Schuyler	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Schuyler	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Schuyler	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Schuyler	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Schuyler	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Schuyler	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Schuyler	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Schuyler	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					

maioatoo pian ao	es not offer Part D drug coverage.								
				Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Schuyler	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Schuyler	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
Schuyler	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	
Scriuyiei	OSF Care Freierred	OSF Cale Fleielled RX Flus (H3525-003)	Local PPO	\$100.00	φ93.00	Φυ	Ennanced	Brands	•
Schuyler	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Schuyler	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Schuyler	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Schuyler	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Schuyler	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Schuyler	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Schuyler	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Schuyler	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Schuyler	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Schuyler	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Schuyler	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Schuyler	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	***************************************	**			
Schuyler	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Scott	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00	Ψ20.70	ΨΟ	Emilanooa	Cononco	<u> </u>
Scott	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Scott	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
		Health Alliance Medicare PPO30 (11417-003)	Local PPO	*	<b>#20.20</b>	ΦO	Dania		
Scott	Health Alliance Medical Plans			\$88.20	\$30.30	\$0	Basic	Comorino	•
Scott	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Scott	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Scott	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Scott	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Scott	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Scott	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Scott	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Scott	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Scott	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Scott	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Scott	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Scott	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Scott	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	<b>\$</b>	4.00			
Scott	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Scott	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Scott	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Scott	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	φ <del>44</del> .90	ΦΟ	Ellianceu	Generics	•
Scott	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00	011.00				
Scott	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Scott	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Scott	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Shelby	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Shelby	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Shelby	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Shelby	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Shelby	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Shelby	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Shelby	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Shelby	Today's Option	Today's Options Value (H5421-035)	PFFS*	\$12.00	Ψ=3.70	ψ.00			†
	1.000,000,000			Ψ.=.00	1	1	1	1	1

* Indicates plan de	oes not offer Part D drug coverage.					1			
				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Shelby	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Shelby	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Shelby	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
St. Clair	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
St. Clair	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
St. Clair	Essence Inc.	Essence Standard Plan (H2610-005)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
St. Clair	Essence Inc.	Essence Enhanced (H2610-006)	Local HMO	\$39.00	\$39.00	\$0	Enhanced	All Formulary Drugs	•
St. Clair	Group Health Plan, Inc.	Advantra Option 1 (H2663-006)	Local HMO	\$0.00	\$0.00	\$0	Basic		•
St. Clair	Group Health Plan, Inc.	Gold Advantage Option 1 (H2663-005)	Local HMO	\$0.00	\$0.00	\$0	Basic		•
St. Clair	Group Health Plan, Inc.	Gold Advantage Option 2 (H2663-007)	Local HMO	\$30.00	\$7.80	\$0	Basic		•
St. Clair	Group Health Plan, Inc.	Advantra Option 2 (H2663-002)	Local HMO	\$69.00	\$17.20	\$0	Enhanced	Generics	•
St. Clair	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
St. Clair	Humana Insurance Company	Humana Gold Choice PFFS H1804-138 (H1804-138)	PFFS	\$39.00	\$25.40	\$0	Enhanced		•
St. Clair	Humana Insurance Company	Humana Gold Choice PFFS H1804-200 (H1804-200)	PFFS	\$59.00	\$26.40	\$0	Enhanced		•
St. Clair	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
St. Clair	Mercy Health Plans, Inc.	PremierPlus - Illinois (no RX) (H2667-014)	Local HMO *	\$25.00	+====	**			
St. Clair	Mercy Health Plans, Inc.	PremierPlus - Illinois (H2667-005)	Local HMO	\$49.00	\$0.00	\$0	Enhanced		•
St. Clair	SecureHorizons	MedicareComplete (H2654-004)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		
St. Clair	SecureHorizons	MedicareComplete Essential (H2654-020)	Local HMO *	\$0.00	ψ0.00	Ψü	21111011000		_
St. Clair	SecureHorizons	MedicareComplete Plus Plan 1 (H2654-013)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
St. Clair	SecureHorizons	MedicareComplete Plus Plan 2 (H2654-022)	Local HMO *	\$0.00	Ψ0.00	Ψΰ	Limanoca		
St. Clair	SecureHorizons	MedicareComplete Choice (H5507-001)	Local PPO	\$30.00	\$6.90	\$0	Enhanced		
St. Clair	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40	ψ0.50	ΨΟ	Lillancea		•
St. Clair	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
St. Clair	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS*	\$9.00					
St. Clair	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
St. Clair	Today's Option	Today's Options Value (H5421-035)	PFFS*	\$12.00	\$20.70	\$100	Ellianceu		•
St. Clair	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
St. Clair	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		
St. Clair	Today's Option	Today's Options Premier Plus (H5421-042)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	
	,	Save Well - Plan I (H7289-001)	MSA *	\$0.00	<del>Ф44.90</del>	ΦU	Ennanced	Generics	•
St. Clair	UniCare		PFFS *	\$0.00		1			
St. Clair St. Clair	Unicare Life & Health Ins. Company Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001) SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		
	1 /		PFFS *	\$11.00	\$11.00	\$0	Enhanced		•
St. Clair St. Clair	Unicare Life & Health Ins. Company Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010) SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$25.00 \$56.00	\$28.70	\$0	Enhanced	Generics	
	1 /				\$28.70	\$0	Ennanced	Generics	•
St. Clair	WellCare	Duet (H4577-003)	PFFS *	\$0.00	<b>\$00.00</b>	60	Enhanced		
St. Clair	WellCare	Concert (H4577-014)	PFFS	\$81.00	\$38.20	\$0 <b>6</b> 0	Enhanced		•
St. Clair	WellCare	Summit (H4577-010)	PFFS	\$211.00	\$50.10	\$0	Enhanced		•
Stark	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Stark	Advantra® Freedom	Freedom 5 (H5227-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Stark	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00	<u> </u>	ļ	ļ		ļ
Stark	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00			<u> </u>		ļ
Stark	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Stark	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Stark	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Stark	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Stark	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Stark	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Stark	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00		ļ			
Stark	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Stark	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•

indicates plan do	pes not offer Part D drug coverage.			Monthly					Office
				Monthly					Offers
				Consolidated	Manadala	0	D	T 6	Variable
			T (14 !!	Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Stark	OSF Care Advantage	OSF Care Advantage (H1468-005)	Local HMO *	\$54.00					
Stark	OSF Care Advantage	OSF Care Advantage Basic Rx (H1468-007)	Local HMO	\$94.00	\$40.10	\$0	Basic		•
Stark	OSF Care Advantage	OSF Care Advantage Rx (H1468-004)	Local HMO	\$129.00	\$75.30	\$0	Enhanced	Generics and Brands	•
Stark	OSF Care Advantage	OSF Care Advantage Rx Plus (H1468-006)	Local HMO	\$153.00	\$98.80	\$0	Enhanced	All Formulary Drugs	•
Stark	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Stark	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Stark	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	
		,		,	,	**		Brands	
Stark	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
Stark	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Stark	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00			<b>†</b>	<u> </u>	
Stark	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Stark	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Stark	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Stark	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Stark	Today's Option	Today's Options Premier (H5421-039)	PFFS*	\$0.00	Ψ20.70	\$100	Lillanceu		-
Stark		Today's Options Value (H5421-038)	PFFS *	\$0.00					
	Today's Option		PFFS		\$10.00	<b>C</b> O	D'-		
Stark	Today's Option	Today's Options Value Plus (H5421-044)		\$10.00		\$0	Basic	Comordos	•
Stark	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	•
Stark	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Stark	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Stark	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Stark	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Stark	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Stark	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Stark	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Stark	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Stark	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Stark	WellCare	Concert (H4577-012)	PFFS	\$0.00	\$0.00	\$0	Enhanced		
Stark	WellCare	Summit (H4577-007)	PFFS	\$140.90	\$14.40	\$0	Enhanced		<u> </u>
Statewide	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	\$14.40	ΦΟ	Lilianceu		•
	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
Statewide	Advantra® Freedom		PFFS *	\$0.00	\$∠6.10	\$0	Basic		•
Stephenson		Freedom 2 (H0846-005)							
Stephenson	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00	<b>A</b> 0.00				
Stephenson	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Stephenson	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Stephenson	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Stephenson	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic	1	•
Stephenson	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Stephenson	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Stephenson	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
Stephenson	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
Stephenson	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00	1	1			1
Stephenson	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40			1		1

indicates plan do	es not offer Part D drug coverage.			Monthly					Offere
				Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Stephenson	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Stephenson	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Stephenson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Stephenson	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Stephenson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Stephenson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Stephenson	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Stephenson	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Stephenson	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Stephenson	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Stephenson	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Stephenson	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Stephenson	WellCare	Concert (H4577-014)	PFFS	\$81.00	\$38.20	\$0	Enhanced		•
Stephenson	WellCare	Summit (H4577-009)	PFFS	\$181.00	\$43.10	\$0	Enhanced		
Tazewell	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00	• -	•			
Tazewell	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS*	\$98.00					
Tazewell	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Tazewell	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		
Tazewell	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	<u> </u>
Tazeweii	ricaliti / illiarice ivicalcai i iaris	Treatti Attianice Medicare 11 000 tx 1 las (111417 000)	Locarrio	ψ57.10	ψ55.20	ΨΟ	Lillancea	GCHCHC3	_
Tazewell	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Tazewell	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (111417-001)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Tazewell	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	-
razeweii	Health Alliance Medical Plans	Health Alliance Medicare PPOTO RX Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Ennanced	Generics	•
T	11		DEEO	<b>#</b> 0.00	\$0.00	60	Enhanced		
Tazewell	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Tazewell	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	000.00	•			
Tazewell	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Tazewell	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Tazewell	OSF Care Advantage	OSF Care Advantage (H1468-005)	Local HMO *	\$54.00					
Tazewell	OSF Care Advantage	OSF Care Advantage Basic Rx (H1468-007)	Local HMO	\$94.00	\$40.10	\$0	Basic		•
Tazewell	OSF Care Advantage	OSF Care Advantage Rx (H1468-004)	Local HMO	\$129.00	\$75.30	\$0	Enhanced	Generics and	•
								Brands	
Tazewell	OSF Care Advantage	OSF Care Advantage Rx Plus (H1468-006)	Local HMO	\$153.00	\$98.80	\$0	Enhanced	All Formulary Drugs	•
Tazewell	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Tazewell	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Tazewell	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	•
								Brands	
Tazewell	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	•
								Brands	
Tazewell	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Tazewell	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Tazewell	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Tazewell	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Tazewell	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Tazewell	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Tazewell	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00	<del>+-3</del>	Ţ.00			
Tazewell	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00				<b>†</b>	
Tazewell	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic	<b>†</b>	
Tazewell	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	
Tazewell	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	ψ++.50	ΨΟ	Limanceu	Ochenca	<b>-</b>
Tazeweii Tazewell		SecurityChoice Classic (H0540-001)	PFFS *	\$0.00			1	<b>†</b>	-
	Unicare Life & Health Ins. Company				C44.00	60	Enhance 1		1
Tazewell	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced	1	•

indicates plan do	pes not offer Part D drug coverage.	T		Manadala					055
				Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Tazewell	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Tazewell	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Tazewell	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Tazewell	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Tazewell	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Tazewell	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Tazewell	WellCare	Duet (H4577-003)	PFFS *	\$0.00					
Tazewell	WellCare	Freedom (H4577-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		
Tazewell	WellCare	Concert (H4577-013)	PFFS	\$41.00	\$1.90	\$0	Enhanced	1	<u> </u>
Tazewell	WellCare	Summit (H4577-008)	PFFS	\$161.00	\$31.30	\$0	Enhanced		•
Union	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00	ψυ1.υυ	ΨΟ	Limanceu	<del> </del>	<del></del>
Union	Advantra® Freedom Advantra® Freedom	Freedom 1 (H0846-003)	PFFS*	\$98.00					+
			PFFS	\$0.00	\$0.00	ΦO	Fahanaad		+
Union	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)			\$0.00	\$0	Enhanced		•
Union	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	<b>#</b> 00.00	•			
Union	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Union	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Union	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Union	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Union	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Union	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Union	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Union	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Union	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Union	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Union	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	*	* -			
Union	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					1
Union	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Union	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	Ψ11.00	ΨΟ	Limaneca		<del></del>
Union	Unicare Life & Health Ins. Company  Unicare Life & Health Ins. Company	SecurityChoice Enhanced (10540-010)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	
	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS*	\$0.00	\$20.70	φυ	Lilianceu	Genencs	<u> </u>
Vermilion									
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare HMO30 (H1463-002)	Local HMO *	\$51.00					<del></del>
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00		•			
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx (H1463-004)	Local HMO	\$88.20	\$30.30	\$0	Basic		•
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20	\$30.30	\$0	Basic		•
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare HMO20 (H1463-001)	Local HMO *	\$91.00					
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx Plus (H1463-006)	Local HMO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					†
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx (H1463-003)	Local HMO	\$128.20	\$30.30	\$0	Basic		•
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx Plus (H1463-005)	Local HMO	\$137.10	\$39.20	\$0	Enhanced	Generics	•
					L				
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Vermilion	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Vermilion	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Vermilion	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	*****	, ,			†
Vermilion	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		
Vermilion	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•

maicates plan do	es not offer Part D drug coverage.			Manadala					055
				Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Vermilion	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Vermilion	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Vermilion	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Vermilion	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Vermilion	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Vermilion	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Vermilion	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Wabash	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Wabash	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Wabash	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Wabash	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Wabash	Sierra Optima	Sierra Optima (H4449-007)	PFFS*	\$218.20					
Wabash	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Wabash	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Wabash	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00	Ψ=3.70	ψ.00		<u> </u>	
Wabash	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					<b>†</b>
Wabash	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic	1	•
Wabash	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	
Wabash	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	ψ <del>44</del> .90	ΦΟ	Lilianceu	Genencs	•
	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					<b>_</b>
Warren									
Warren	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	000.40		<u> </u>		<del> </del>
Warren	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Warren	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Warren	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Warren	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					<b></b>
Warren	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		•
Warren	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
Warren	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
Warren	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Warren	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Warren	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	Ψ20σ	ψ.σσ	21111011000		
Warren	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					<b>†</b>
Warren	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Warren	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Warren	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	Ψ-1.50	ΨΟ	Limaneca	GCHCHC3	<del></del>
Warren	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Warren	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Warren	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	Ψ11.00	ΨΟ	Lilianceu		
			PFFS		\$28.70	ΦO	Fahanaad	Conorios	
Warren	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	_	\$56.00		\$0 \$0	Enhanced	Generics	•
Warren	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Warren	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Warren	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Warren	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Washington	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00	1	1	1	1	
Washington	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	t	t	<b>†</b>	1	<b>†</b>
Washington	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
Washington	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$20.10	\$0	Enhanced		
Washington	Humana Insurance Company Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$129.00	\$24.30	\$0	Enhanced	<del>                                     </del>	•

	es not offer Part D drug coverage.			Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Washington	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	Premium	Deductible	туре	Offered III the Gap	payments
		Sterling Option I (H5006-011)	PFFS *	\$9.00					
Washington	Sterling Life Insurance Company		PFFS	\$9.00	\$28.70	\$100	Entranced		
Washington	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS *		\$28.70	\$100	Enhanced		•
Washington	Today's Option	Today's Options Value (H5421-035)		\$12.00					
Washington	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00	<b>#</b> 04.00	•	<u> </u>		
Washington	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Washington	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Washington	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Wayne	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Wayne	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Wayne	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Wayne	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Wayne	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Wayne	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Wayne	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Wayne	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Wayne	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Wayne	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Wayne	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Wayne	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
White	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
White	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
White	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
White	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
White	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
White	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
White	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
White	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
White	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
White	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		
White	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
White	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00		7.			
White	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
White	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
White	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	ψσ	Ψ.	21111011000		
White	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Whiteside	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00	Ψ20.70	ΨΟ	Ermanoca	Generies	
Whiteside	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Whiteside	Humana Insurance Company	Humana Gold Choice PFFS H1804-138 (H1804-138)	PFFS	\$39.00	\$25.40	\$0	Enhanced		•
Whiteside	Humana Insurance Company	Humana Gold Choice PFFS H1804-200 (H1804-200)	PFFS	\$59.00	\$26.40	\$0	Enhanced		
Whiteside	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.40	\$0 \$0	Basic	<del>                                     </del>	
Whiteside	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00	ψ20.10	ΨU	Dasic	1	•
Whiteside	OSF Care Preferred	OSF Care Preferred (H3525-002) OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		
Whiteside	OSF Care Preferred OSF Care Preferred	OSF Care Preferred Basic RX (H5525-004) OSF Care Preferred RX (H5525-001)	Local PPO	\$93.00	\$75.10	\$0	Enhanced	Generics and	•
Willeside	OSF Care Freieneu	OSF Care Freiened RX (113323-001)	Local FFO	\$120.00	\$75.10	φυ	Ellianceu	Brands	•
\\/\b:taa:da	OSE Cara Brotowad	OSF Care Preferred Rx Plus (H5525-003)	Less DDO	¢400.00	ድርስ በር	\$0	Fahanaad		•
Whiteside	OSF Care Preferred	OSF Gare Preferred RX Plus (FIDDZD-003)	Local PPO	\$168.00	\$93.80	ΦU	Enhanced	Generics and	•
Mhitooido	Coouro Horizono Madisora Disast	CoournHorizona Madigara Direct Diag 40 (UE 405, 040)	DEEC *	<b>\$0.00</b>	<del>                                     </del>		<del>                                     </del>	Brands	
Whiteside	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00	<del>                                     </del>		<del>                                     </del>		
Whiteside	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40	<del>                                     </del>		<del>                                     </del>	1	
Whiteside	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20	<del>                                     </del>		<del>                                     </del>		
Whiteside	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	000 =0	0400	<del>  </del>	1	
Whiteside	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced	1	•
Whiteside	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Whiteside	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					

mulcates plan doe	es not offer Part D drug coverage.								0.00
				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Whiteside	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Whiteside	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Whiteside	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Whiteside	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Whiteside	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Whiteside	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Whiteside	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•
Will	Aetna Medicare	Aetna Medicare Open Standard Plan (H5736-007)	PFFS	\$103.00	\$27.00	\$0	Enhanced	Generics	•
Will	Aetna Medicare	Aetna Medicare Open Premier Plan (H5736-008)	PFFS	\$163.00	\$61.20	\$0	Enhanced	Generics	•
Will	HealthSpring, Inc.	HealthSpring Advantage (H1415-009)	Local HMO *	\$0.00					
Will	HealthSpring, Inc.	HealthSpring Advantage Basic (H1415-014)	Local HMO	\$0.00	\$0.00	\$265	Basic		
Will	HealthSpring, Inc.	HealthSpring Advantage PremieRx (H1415-004)	Local HMO	\$16.70	\$16.70	\$0	Enhanced	Generics	•
Will	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00					
Will	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		•
Will	Humana Insurance Company	HumanaChoicePPO PPO H1418-002 (H1418-002)	Local PPO	\$99.00	\$25.70	\$0	Enhanced		•
Will	Humana Insurance Company	Humana Gold Choice PFFS H1804-125 (H1804-125)	PFFS	\$109.00	\$22.90	\$0	Enhanced		•
Will	Humana Insurance Company	Humana Gold Choice PFFS H1804-198 (H1804-198)	PFFS	\$129.00	\$24.30	\$0	Enhanced		•
Will	SecureHorizons	MedicareComplete Plus Plan 1 (H3887-003)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Will	SecureHorizons	MedicareComplete Plus Plan 2 (H3887-004)	Local HMO *	\$0.00	ψο.σσ	Ψ.	211110111000		
Will	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Will	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Will	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Will	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00	*				
Will	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Will	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Will	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Will	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	<b>.</b>	7.			
Will	WellCare	WellCare Choice (H1416-001)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Will	WellCare	WellCare Value (H1416-009)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		
Williamson	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00	40.00	7.			
Williamson	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		
Williamson	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	40.00	7.			
Williamson	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Williamson	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
Williamson	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	*	* -			
Williamson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Williamson	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	4_0110	¥.55			
Williamson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Williamson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Williamson	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	
Williamson	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	7.1100			22.10.100	
Winnebago	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Winnebago	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Winnebago	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced	1	•
Winnebago	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	ψ0.00	ΨΟ	Lillancea		
Winnebago	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced	<del> </del>	
Winnebago	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic	<del> </del>	
Winnebago Winnebago	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00	ψ20.10	ΨU	Dasic	1	•
vviiiilebayU	OSF Care Preferred OSF Care Preferred	OSF Care Preferred (H5525-002) OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0		l .	<u> </u>

	es not offer Part D drug coverage.			Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Winnebago	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and	payments
viiiiicbago	our oure reletted	Got Gale Froience TXX (Floo25 001)	Locarro	ψ120.00	Ψ/ 3.10	ΨΟ	Lillancea	Brands	
Vinnebago	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and	•
3.1.0				,		•		Brands	
Winnebago	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Winnebago	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					<del>                                     </del>
Vinnebago	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Vinnebago	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Vinnebago Vinnebago	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS*	\$149.20					<del></del>
Winnebago Winnebago	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	£400	Fahanaad		•
Ninnebago					\$28.70	\$100	Enhanced	-	<u> </u>
Ninnebago	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00					
Ninnebago	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00					
Vinnebago	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic		•
Ninnebago	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	•
Vinnebago	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Vinnebago	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Vinnebago	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Vinnebago	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Vinnebago	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Vinnebago	WellCare	Concert (H4577-014)	PFFS	\$81.00	\$38.20	\$0	Enhanced		•
Vinnebago	WellCare	Summit (H4577-009)	PFFS	\$181.00	\$43.10	\$0	Enhanced		
Noodford	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00	ψ.σσ	ΨŰ	21111011000		
Voodford	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Woodford	Health Alliance Medical Plans	Health Alliance Medicare HMO30 (H1463-002)	Local HMO *	\$51.00					<del></del>
Woodford	Health Alliance Medical Plans	Health Alliance Medicare PPO30 (H1417-003)	Local PPO *	\$51.00					
Noodford	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx (H1417-003)	Local HMO	\$88.20	\$30.30	\$0	Basic		
	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx (H1417-004)	Local PPO	\$88.20		\$0	Basic	-	_
Noodford					\$30.30	\$0	Basic		•
Noodford	Health Alliance Medical Plans	Health Alliance Medicare HMO20 (H1463-001)	Local HMO *	\$91.00					
Voodford	Health Alliance Medical Plans	Health Alliance Medicare HMO30 Rx Plus (H1463-006)	Local HMO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Woodford	Health Alliance Medical Plans	Health Alliance Medicare PPO30 Rx Plus (H1417-006)	Local PPO	\$97.10	\$39.20	\$0	Enhanced	Generics	•
Noodford	Health Alliance Medical Plans	Health Alliance Medicare PPO10 (H1417-001)	Local PPO *	\$101.00					
Noodford	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx (H1463-003)	Local HMO	\$128.20	\$30.30	\$0	Basic		•
Woodford	Health Alliance Medical Plans	Health Alliance Medicare HMO20 Rx Plus (H1463-005)	Local HMO	\$137.10	\$39.20	\$0	Enhanced	Generics	•
Woodford	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx (H1417-002)	Local PPO	\$138.20	\$30.30	\$0	Basic		•
Woodford	Health Alliance Medical Plans	Health Alliance Medicare PPO10 Rx Plus (H1417-005)	Local PPO	\$147.10	\$39.20	\$0	Enhanced	Generics	•
Woodford	Humana Insurance Company	Humana Gold Choice PFFS H1804-137 (H1804-137)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Woodford	Humana Insurance Company	HumanaChoicePPO PPO R5826-023 (R5826-023)	Regional PPO *	\$0.00	ψ0.00	ΨΟ	Limanoed		<u> </u>
Woodford	Humana Insurance Company	Humana Gold Choice PFFS H1804-199 (H1804-199)	PFFS	\$20.00	\$20.00	\$0	Enhanced		
Woodford	Humana Insurance Company	HumanaChoicePPO PPO R5826-009 (R5826-009)	Regional PPO	\$71.00	\$26.10	\$0	Basic		
					\$∠6.10	\$0	Basic	-	•
Noodford	OSF Care Advantage	OSF Care Advantage (H1468-005)	Local HMO *	\$54.00	0.46 15	<b>*</b>	<u> </u>		<b>├</b>
Noodford	OSF Care Advantage	OSF Care Advantage Basic Rx (H1468-007)	Local HMO	\$94.00	\$40.10	\$0	Basic	L	•
Voodford	OSF Care Advantage	OSF Care Advantage Rx (H1468-004)	Local HMO	\$129.00	\$75.30	\$0	Enhanced	Generics and Brands	•
Noodford	OSF Care Advantage	OSF Care Advantage Rx Plus (H1468-006)	Local HMO	\$153.00	\$98.80	\$0	Enhanced	All Formulary Drugs	•
Noodford	OSF Care Preferred	OSF Care Preferred (H5525-002)	Local PPO *	\$53.00					
Voodford	OSF Care Preferred	OSF Care Preferred Basic Rx (H5525-004)	Local PPO	\$93.00	\$39.50	\$0	Basic		

			Type of Medicare	Monthly Consolidated Premium (Includes	Monthly Drug	Annual Drug	Drug Benefit	Type of Extra Coverage	Offers Variable Drug Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible		Offered in the Gap	
Woodford	OSF Care Preferred	OSF Care Preferred Rx (H5525-001)	Local PPO	\$128.00	\$75.10	\$0	Enhanced	Generics and Brands	•
Woodford	OSF Care Preferred	OSF Care Preferred Rx Plus (H5525-003)	Local PPO	\$168.00	\$93.80	\$0	Enhanced	Generics and Brands	•
Woodford	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Woodford	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 1 (H5435-001)	PFFS *	\$0.00					
Woodford	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Rx Plan 55 (H5435-014)	PFFS	\$10.30	\$10.30	\$265	Basic		
Woodford	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Woodford	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Woodford	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Woodford	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Woodford	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00					
Woodford	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00					
Woodford	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic		•
Woodford	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	•
Woodford	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Woodford	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Woodford	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Woodford	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Woodford	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Woodford	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plan 1 (H4456-010)	Local HMO	\$0.00	\$0.00	\$0	Enhanced		•
Woodford	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Essential (H4456-016)	Local HMO *	\$56.00					
Woodford	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus 15 (H4456-015)	Local HMO	\$78.00	\$13.40	\$0	Enhanced		•
Woodford	UnitedHealthcare Plan of the River Valley, Inc.	MedicareComplete Plus Prime (H4456-017)	Local HMO	\$113.00	\$10.80	\$0	Enhanced		•